FORMS 1, 2 AND 3 SHELBY COUNTY HEAD START BUSINESS AUTOMOBILE COVERAGE

SHELBY COUNTY GOVERNMENT REQUEST FOR PROPOSALS – HEAD START BUSINESS INSURANCE

FORM 1 - BROKER/AGENT QUESTIONNAIRE

1.	Explain your firm's ownership structure.
2.	How many years has your firm been in business?
3.	Describe the industry diversity of your firm's client base.
4.	Describe the account team's expertise and experience in dealing with public sector coverage.
5.	Describe the expertise and experience dealing with property insurance for clients with insured values in excess of two hundred million dollars of the account team proposing to place the requested insurance.
6.	Identify the names and location of your proposed account service team that would actually service County's account. Describe each member's service role. Provide the qualifications of each member including title, role, education, tenure at firm, years of relevant experience, years and type of public sector experience. Who will the day-to-day contacts be for the account? (Attached separate sheet with this information.)
7.	What are your top property insurance markets and what is your premium volume with each?
8.	How long has your account team had a relationship with each of the markets noted above?
9.	Describe the measures your firm takes to stay abreast of changes in the marketplace, i.e. fees, commissions, contingencies, insurer merger/acquisition, pricing trends, insurer solvency, etc.
10.	Describe any capabilities your firm may have to enhance a client's risk management programs.
11.	Provide an example of the skills and experience your firm has in designing or enhancing clients' property insurance programs.
12	Provide an example of a recommendation you have made to another client that brought additional value to the client's property insurance program.

SHELBY COUNTY GOVERNMENT REQUEST FOR PROPOSALS – HEAD START BUSINESS AUTOMOBILE INSURANCE

FORM 2 - CERTIFICATION

l certify that (insert name of firm) obtain a commitment to underwrite the this Request For Proposals:	did no proposed insurance prior to the date o	
Insurance Company		
	SIGNATURE	
	NAME	
	TITLE	
	COMPANY	
	PHONE NUMBER	
	FAX NUMBER	
	E-MAIL ADDRESS	

SHELBY COUNTY GOVERNMENT REQUEST FOR PROPOSALS – HEAD START BUSINESS AUTOMOBILE INSURANCE

FORM 3 - INSURANCE PREMIUM PROPOSAL

You may include your own proposal form but we request that you complete this sheet indicating basic information regarding the premium, rates and fees.

Brokerage fees/commissions shall be provided separately at the end of this form.										
Estimated Total Annual Premium										
□ This proposal conforms to County's current coverage; or □ This proposal deviates from County's current coverage as follows: (Attach separate sheets, if necessary)										
nsurance Company:										
Best's Rating for 2 most recent years										
Are policy forms and endorsements attached?										
Broker/Agent's Name:										
Person with authority to bind coverage:										
Signature:										
Title: Date:										
Brokerage/Agent Fees or Commissions: Brokerage fee shall include: Any basic commission negotiated with the insurers;										
Commission contingent on volume or profit										
 Revenue/income arising from any other source. 										
Will your firm agree to provide this information in the future at each renewal?										
Are there any financial ties between your firm and any of the insurers you are including in your proposal? If yes, please explain.										
ls any aspect of your firm's business financed by an insurer? If yes, please explain.										

ATTACHMENT 1 SHELBY COUNTY HEAD START BUSINESS AUTOMOBILE COVERAGE COVERAGE INFORMATION

ATTACHMENT 1 COVERAGE INFORMATION

SHELBY COUNTY HEAD START

BUSINESS AUTOMOBILE COVERAGE

Required Limits and Coverages

\$1,000,000 CSL Liability - Symbol 0I - ISO Form CA 00 01 03 06

\$5,000 Medical Payments – Symbol 02 – ISO Form CA 99 03 03 06

\$1,000,000 CSL Uninsured Motorists - Symbol 02 - ISO Form CA 21 20 03 06

\$1,000,000 CSL Underinsured Motorists – Symbol 02

Physical Damage Comprehensive Coverage – Symbol 07, 08 \$500 deductible

Physical Damage Collision Coverage – Symbol 07, 08 \$1,000 deductible

Hired or Borrowed Covered Auto Coverage
Liability - Tennessee - Estimated Cost of Hire \$5,000
Physical Damage
Comprehensive - Estimated Cost of Hire \$2,000 - \$100 deductible
Collision - Estimated Cost of Hire \$2,000 - \$1,000 deductible

Non-ownership liability - Number of employees 25

Business Auto Coverage Extension Form – PI-CA-001 (5/99) (copy attached)

Attach Form CA 20 55 to delete the Fellow Employee Exclusion.

Attach Waiver of Governmental Tort Liability Act limits per T.C.A. 29-20-101 et seq. Endorse to provide 60 Day Notice of Cancellation.

ATTACHMENT 2 SHELBY COUNTY HEAD START BUSINESS AUTOMOBILE COVERAGE SURPLUS LINES CODE

56-14-105. Eligibility for surplus lines insurance. —

- (a) No insurance coverage shall be eligible for surplus lines unless the full amount of insurance required is not procurable, after a diligent effort has been made to do so, from among the insurers licensed to transact and actually writing that kind and class of insurance in this state, and the amount of insurance eligible for surplus lines shall be only the amount in excess of the amount so procurable from licensed insurers.
- (b) Policy or contract forms shall not be eligible unless the use is reasonably necessary for the principal purposes of the coverage, or unless the use would not be contrary to the purposes of the coverage, or unless the use would not be contrary to the purposes of this chapter with respect to the reasonable protection of authorized insurers from unwarranted competition by unauthorized insurers.
- (c) The following kinds of insurance shall not be eligible for surplus lines insurance:
 - (1) Primary personal automobile liability;
 - (2) Surety; and
- (3) Workers' compensation, except as provided in subsection (a). [Acts 1969, ch. 270, § 5; T.C.A., § 56-3805; Acts 2001, ch. 220, §§ 2, 3.]

ATTACHMENT 3 SHELBY COUNTY HEAD START BUSINESS AUTOMOBILE COVERAGE ACORD APPLICATIONS

ACORD
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COMMERCIAL INSURANCE APPLICATION

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AGENCY CUSTOMER ID: GENERAL INFORMATION EXPLAIN ALL "YES" RESPONSES Y/N Ν IS THE APPLICANT A SUBSIDIARY OF ANOTHER ENTITY? RELATIONSHIP DESCRIPTION % OWNED PARENT COMPANY NAME 1b. DOES THE APPLICANT HAVE ANY SUBSIDIARIES? Ν % OWNED SUBSIDIARY COMPANY NAME RELATIONSHIP DESCRIPTION IS A FORMAL SAFETY PROGRAM IN OPERATION? AS REQUIRED SAFETY MANUAL MONTHLY MEETINGS SAFETY POSITION OSHA N ANY EXPOSURE TO FLAMMABLES, EXPLOSIVES, CHEMICALS? 3. ANY OTHER INSURANCE WITH THIS COMPANY? (List policy numbers) N LINE OF BUSINESS **POLICY NUMBER** LINE OF BUSINESS POLICY NUMBER ANY POLICY OR COVERAGE DECLINED, CANCELLED OR NON-RENEWED DURING THE PRIOR THREE (3) YEARS FOR ANY PREMISES OR N OPERATIONS? (Missouri Applicants - Do not answer this question) NON-PAYMENT AGENT NO LONGER REPRESENTS CARRIER NON-RENEWAL UNDERWRITING CONDITION CORRECTED (Describe): ANY PAST LOSSES OR CLAIMS RELATING TO SEXUAL ABUSE OR MOLESTATION ALLEGATIONS, DISCRIMINATION OR NEGLIGENT HIRING? N DURING THE LAST FIVE YEARS (TEN IN RI), HAS ANY APPLICANT BEEN INDICTED FOR OR CONVICTED OF ANY DEGREE OF THE CRIME OF FRAUD, Ν BRIBERY, ARSON OR ANY OTHER ARSON RELATED CRIME IN CONNECTION WITH THIS OR ANY OTHER PROPERTY? (In RI, this question must be answered by any applicant for property insurance. Failure to disclose the existence of an arson conviction is a misdemeanor punishable by a sentence of up to one year of imprisonment). 8. ANY UNCORRECTED FIRE AND/OR SAFETY CODE VIOLATIONS? Ν RESOLUTION OCCURRENCE RESOLUTION **EXPLANATION** DATE DATE HAS APPLICANT HAD A FORECLOSURE, REPOSSESSION, BANKRUPTCY OR FILED FOR BANKRUPTCY DURING THE LAST FIVE (5) YEARS? Ν RESOLUTION OCCURRENCE RESOLUTION DATE **EXPLANATION** DATE N 10. HAS APPLICANT HAD A JUDGEMENT OR LIEN DURING THE LAST FIVE (5) YEARS? OCCURRENCE RESOLUTION **EXPLANATION** RESOLUTION DATE DATE Ν 11. HAS BUSINESS BEEN PLACED IN A TRUST? NAME OF TRUST 12. ANY FOREIGN OPERATIONS, FOREIGN PRODUCTS DISTRIBUTED IN USA, OR US PRODUCTS SOLD/DISTRIBUTED IN FOREIGN COUNTRIES? N (If "YES", attach ACORD 815 for Liability Exposure and/or ACORD 816 for Property Exposure) Ν 13. DOES APPLICANT HAVE OTHER BUSINESS VENTURES FOR WHICH COVERAGE IS NOT REQUESTED? REMARKS / PROCESSING INSTRUCTIONS (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Page 3 of 4

ACORD 125 (2009/08)

PRIOR CARRIER INFORMATION

YEAR	CATEGORY	GENERAL LIABILITY	AUTOMOBILE	PROPERTY	OTHER:	
	CARRIER		PHILADELPHIA			
	POLICY NUMBER		PHPK434814			
	PREMIUM	\$	\$ 77,671.	\$	\$	
	EFFECTIVE DATE		07/01/2009			
	EXPIRATION DATE		07/01/2010			
	CARRIER		PHILADELPHIA			
	POLICY NUMBER		PHPK326529			
	PREMIUM	\$	\$ 72,974.	\$	\$	
	EFFECTIVE DATE		07/01/2008			
	EXPIRATION DATE		07/01/2009			
	CARRIER		PHILADELPHIA			
	POLICY NUMBER		PHPK244515			
	PREMIUM	\$	\$ 65,088	\$	\$	
	EFFECTIVE DATE		07/01/2007			
	EXPIRATION DATE		07/01/2008			
	CARRIER		PHILADELPHIA			
	POLICY NUMBER		PHPK177932			
	PREMIUM	\$	\$ 78,259	\$	\$	
	EFFECTIVE DATE		07/01/2006			
	EXPIRATION DATE		07/01/2007			

LOSS HISTO	RY	Check if none (Attach Loss Summary f	or Additional Loss	s Information)			
ENTER ALL CLAIMS FOR THE LAST	S OR LOSSES YEARS	(REGARDLESS OF FAULT AND WHETHER OR NOT INSURED) O	R OCCURRENCES THAT	MAY GIVE RISE TO CLA	TOTAL LOSSES: \$		
DATE OF OCCURRENCE	LINE	TYPE / DESCRIPTION OF OCCURRENCE OR CLAIM	AMOUNT PAID	AMOUNT RESERVED	SUBRO- GATION Y/N	CLAIM OPEN Y/N	
		SEE ATTACHMENT.					
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SIGNATURE

COPY OF THE NOTICE OF INFORMATION PRACTICES (PRIVACY) HAS BEEN GIVEN TO THE APPLICANT, (Not applicable in all states, consult your agent or broker for your state's requirements.)

NOTICE OF INSURANCE INFORMATION PRACTICES - PERSONAL INFORMATION ABOUT YOU MAY BE COLLECTED FROM PERSONS OTHER THAN YOU IN CONNECTION WITH THIS APPLICATION FOR INSURANCE. SUCH INFORMATION AS WELL AS OTHER PERSONAL AND PRIVILEGED INFORMATION COLLECTED BY US OR OUR AGENTS MAY IN CERTAIN CIRCUMSTANCES BE DISCLOSED TO THIRD PARTIES WITHOUT YOUR AUTHORIZATION. YOU HAVE THE RIGHT TO REVIEW YOUR PERSONAL INFORMATION IN OUR FILES AND CAN REQUEST CORRECTION OF ANY INACCURACIES. A MORE DETAILED DESCRIPTION OF YOUR RIGHTS AND OUR PRACTICES REGARDING SUCH INFORMATION IS AVAILABLE UPON REQUEST. CONTACT YOUR AGENT OR BROKER FOR INSTRUCTIONS ON HOW TO SUBMIT A REQUEST TO US

ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR ANOTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING INFORMATION CONCERNING ANY FACT MATERIAL THERETO, COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME AND SUBJECTS THE PERSON TO CRIMINAL AND INY: SUBSTANTIAL] CIVIL PENALTIES. (Not applicable in CO, DC, FL, HI, MA, NE, OH, OK, OR, VT or WA; in LA, ME, TN and VA, insurance benefits may also be denied)

IN THE DISTRICT OF COLUMBIA, WARNING: IT IS A CRIME TO PROVIDE FALSE OR MISLEADING INFORMATION TO AN INSURER FOR THE PURPOSE OF DEFRAUDING THE INSURER OR ANY OTHER PERSON. PENALTIES INCLUDE IMPRISONMENT AND/OR FINES.

IN FLORIDA, ANY PERSON WHO KNOWINGLY AND WITH INTENT TO INJURE, DEFRAUD, OR DECEIVE ANY INSURER FILES A STATEMENT OF CLAIM OR AN APPLICATION CONTAINING ANY FALSE, INCOMPLETE, OR MISLEADING INFORMATION IS GUILTY OF A FELONY OF THE THIRD DEGREE.

IN MASSACHUSETTS, NEBRASKA, OREGON AND VERMONT, ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR ANOTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING INFORMATION CONCERNING ANY FACT MATERIAL THERETO, MAY BE COMMITTING A FRAUDULENT INSURANCE ACT, WHICH MAY BE A CRIME AND MAY SUBJECT THE PERSON TO CRIMINAL AND CIVIL PENALTIES.

IN WASHINGTON, IT IS A CRIME TO KNOWINGLY PROVIDE FALSE, INCOMPLETE, OR MISLEADING INFORMATION TO AN INSURANCE COMPANY FOR THE PURPOSE OF DEFRAUDING THE COMPANY. PENALTIES INCLUDE IMPRISONMENT, FINES, AND DENIAL OF INSURANCE BENEFITS.

THE UNDERSIGNED IS AN AUTHORIZED REPRESENTATIVE OF THE APPLICANT AND REPRESENTS THAT REASONABLE ENQUIRY HAS BEEN MADE TO OBTAIN THE ANSWERS TO QUESTIONS ON THIS APPLICATION. HE/SHE REPRESENTS THAT THE ANSWERS ARE TRUE, CORRECT AND COMPLETE TO THE BEST OF HIS/HER KNOWLEDGE.

PRODUCER'S SIGNATURE	PRODUCER'S NAME (Please Print)		STATE PRODUCER LICENSE NO (Required in Florida)
APPLICANT'S SIGNATURE		DATE	NATIONAL PRODUCER NUMBER
SHELBY COUNTY GOVERNMENT		04/01/2010	



TENNESSEE COMMERCIAL AUTO COVERAGES/LIMITS SECTION

DATE (MM/DD/YYYY)

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INFORMATION C	TO DE	:\/#E\A	I YOUR PERS	ONALI	NEORMATI	ON IN OI	UR FILE!	S AND CAN RE	OUE	ST CORI	RECTI	ON (JF AN	Y INA	CCUI	RACIES.	AMUR	EDEIAIL	EU
DESCRIPTION O	F YOUR	RIGH	ITS AND OUR	PRAC	TICES REG	ARDING	SUCHI	NFORMATION	IS AV	AILABLE	UPO	N RE	QUES	ST. CO	ATAC	CT YOU	IR AGEN	T OR BR	OKER FOR
INSTRUCTION OF	N HOW	TO SI	UBMIT A REQ	UEST:	TO US.														
IT IS A CRIME TO THE COMPANY.	KNOW	INGLY	Y PROVIDE FA	ALSE, I	NCOMPLET	E OR MI	ISLEADII	NG INFORMAT	ION T	O AN IN: NEETS	SURA	NCE	СОМ	PANY	FOR	THE PL	IRPOSE	OF DEFR	AUDING
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ACORD®	

VEHICLE SCHEDULE

DATE (MM/DD/YYYY) 04/05/2010

AGENCY											CAR	RIER								NAIC CO	DDE
POLICY N	JMBER	1							EFFE	CTIVE DATE	NAME	D INSURE	D(S)								
VEHICLI	DES	CRI	PTION	ł				·													
VEH#	YEAF	-		DODGE					BODY VA							VEHICLE		SYM / /	AGE OF	OMP / C SYM	COLL Sym
1	199			RAM MA	XI WAG	ON 3			V.I.N.: 2E	35WB35Z9	SK54	7436			₽₽	SPE	C COML	<u> </u>		1715	
GARAGINO ADDRESS	5 I	REET	(Requi	red in KY)				CITY MEM	PHIS				- 1	OUNTY HELB	βY				STATE TN	ZIP 3811	2
LIC STATE	TE	RR		GVV	V / GCW		CLA		SIC	FACT	OR	SEAT CP	R/	ADIUS		FARTHE	ST TERMINAL		(OST NEV	N
TN	001	1					6842				1	15	L						-	,000	
USE		V	COMM	rL FC	R HIRE	CHE	CK ERAGES	Á	DD'L NO-	✓ UNDRI	งูร	F		LSP		RENT REIMB	DEDUCTIBLES	3 /	.cv 🗸	COMP/ OTC	SPEC C OF L
PLEA	SURE		RETAI	L		V	LIAB	√ ∧	MED PAY	TOWIN & LABO	G [FT	✓	COMP/ OTC		FG	AA	STA	мт \$:	00	
FARM			SERVI	CE			NO- FAULT	V 1	ININS AOTOR	SPEC C OF L		FTW	V	COLL			\$		\$ 1	1000	COLL
DRIVE TO	CHOOL		< 15	MILES	15 MIL	ES+	NET/C	EH R:									TOTAL PREM:			oun (l	
VEH #	YEA	1 "	IAKE:	FORD					POPE: BU							VEHICLE		SYM /	AGE 0	OMP / IC SYM	COLL SYM
2	199	5	IODEL:	65 PASS	ENGER	BUS			V.I.N.: 1F	DP880C6	5VA4	3664			PP	SPE	C COML		07075	Tun	
GARAGIN	G	REET	(Requi	red in KY)			1	CITY						OUNTY					STATE	1	10
ADDRESS	_								IPHIS		OF 1	CEAT OF		HELE) Y	EADTUE	ST TERMINAL		TN	3811 COST NEV	
LIC STATE		ERR 4		GV	N / GCW		CLA	3 5	SIC	FAC1	- 1	SEAT CP	1	ADIUS		PARTHE	O I I ECMINAL			,000	
TN	00	l #	200			CHE	6484 ≘cκ	4	ADD'L NO-T	/ UNDRI		F F	L.	LSP		RENT REIMB	DEDUCTIBLE	s T	۱ ۳	COMP/ OTC	SPEC C OF L
USE	eure	lack lack	COMM	\vdash	OR HIRE	ČÖ	CK VERAGES		ADD'L NO-	✓ UNDRI MOTO TOWN	IG]	FT		COMP/ OTC	,	REIMB FG	AA		MT \$		
FARM	SURE		SERV				LIAB NO-		MED PAY JNINS MOTOR	& LAB SPEC C OF L	OR	- FTW	Y	COLL			s 100	1 0. /		1000	COLL
DRIVE TO WORK 78		Н		MILES	15 MIL	ES +	PAULT NET V	EH .	MOTOR	C OF L			Y		1. 1.		TOTAL PREM	: \$			OOLL
WORK / S VEH #	YEA	_		FORD	15 WILL		DR/C	:R:	BODY B	us				· T		VEHICLE		SYM /	AGE C	OMP / TC SYM	COLL SYM
3	199	_ -		65 PAS	SENGER	RUS				FDP880CX	(SVA4	43666			PF	SPE	c J COML		ľ	100,141	Ø1.m
<u></u>	ST			ired in KY)	JE, (10		<u> </u>	CITY	1				С	OUNTY					STATE	ZIP	
GARAGIN ADDRESS								MEN	IPHIS				8	SHELE	3Y				TN	381	12
STATE	T	ERR	T	GV	W / GCW		CLA	SS	SIC	FAC	ror	SEAT CP	R	ADIUS		FARTH	ST TERMINAL		1	COST NE	W
TN	00	1					6484					65	L						\$ 40	0,000	
USE		V	COM	Vi'L F	OR HIRE	CHI	ECK VERAGES	s	ADD'L NO- FAULT	✓ UNDR MOTO	INS R	F		LSP		RENT REIMB	DEDUCTIBLE	s	ACV 🗸	COMP/ OTC	SPEC C OF L
PLEA	SURE		RETA	JIL 🗌		✓	LIAB	V	MED PAY	TOWII & LAB	OR L	FT	√	COMP/ OTC	′	FG	_ AA	ST	_ <u> </u>	500	
FARI			SERV	ICE			NO- FAULT	/	UNINS MOTOR	SPEC C OF		FTW	√	COLL			\$		\$	1000	COLL
DRIVE TO WORK 78	СНОО			MILES	15 M11		NET/	K!									TOTAL PREM		105	OMP /	COLL
VEH#	YEA			INTERN					BODY B						-	VEHICL		SYM	AGE d	TC SYM	SYM
4	199			: 65 PAS	SENGER	R BUS	S	r	V.I.N.: 1	VHBBBAE	P4TH	1346832	-		P	SPE	COMP	Щ	STAT	= 17IP	l
GARAGIN	iG	TREE	T (Requ	ired in KY)				CITY	#DLUC					SHELI	DV				TN	381	12
ADDRES:				-	W / GCW		CL	I	∄PHIS sic	EAC	TOR	SEAT CP		RADIUS	 	FARTH	EST TERMINAL		+	COST NE	
STATE	00	ERR 1	1	Gv	W / GCW		6484	400	310	120	·OK	65	L	(ADIOO					s 6	5,000	
USE	00	1	СОМ	M") E	OR HIRE	ÇH	ECK VERAGE		ADD'L NO-	✓ UNDR	ins	F	+-	LSP	+	RENT	DEDUCTIBLE	S	1 *	COMP/ OTC	SPEC C OF L
<u> </u>	ASURE	_	RETA	\vdash	OK HINE	. /	1	S	FAULT MED PAY	TOWI & LAE	NG	FT	./	COMP	·/	REIMB FG	AA [AMT \$		
FAR		-	SERV	L		Y	NO-		UNINS MOTOR	& LAE SPEC C OF	UK	FTW	Ż	COLL			\$ 7.41	1		1000	COL
DRIVE TO			<u> </u>	5 MILES	15 M	LES +	FAULT NET DR /	XEH T	MOIOK	J 1 C OF	<u>. </u>		▼			. ,,,,, ,	TOTAL PREM	A: \$			
VEH#	YE/			FORD			L/K /	Y14	BODY TYPE:							VEHICL	E TYPE	SYM	AGE	COMP / OTC SYM	COLL
5	199	96 F		L: CUTAV	/AY TRU	ick			~	FDLE4F6	5THB	52396	•		P	P SP	EC COML				
GARAGII	₩G			uired in KY)				CITY	MDUIC			******		COUNTY			L. Zarr		STAT	E ZIP 381	12
ADDRES		TERR		<u></u>	/W / GCW		CI	ASS	MPHIS sic	FAC	TOR	SEAT CF		RADIUS	5 	FARTH	EST TERMINAL		+**	COST N	
STATE TN	00			5,000	. 17 / GUYY		0149						L						s 4	0,000	
USE			СОМ	IM'L i	FOR HIRE	CH	IECK OVERAGE	s	ADD'L NO- FAULT	✓ UNDI	RINS OR	F		LSP		RENT REIMB	DEDUCTIBLE	ES	ACV 🗸	COMP/ OTC	SPEC C OF
PLE	ASUR	Ē	RET	AIL		Ž	LIAB	V	MED PAY	TOW & LAI	ING BOR	FT	V	COMP	7	FG	_ AA	ST	AMT \$	500	
FAF		V	SER	VICE			NO- FAULT		UNINS MOTOR	SPEC C OF	;	FTW		COLL	-		\$		\$	1000	COL
DRIVE T WORK	O SCHOO	DL	< 1	5 MILES	15 M	ILES +	NET/	VEH CR:									TOTAL PRE	M: \$			
1																					

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AC	<u>U</u> K				VE	HICL	E SC	HED	ULE					DAIL	(111111) 22	,
AGENCY							CA	RRIER	·						NAIC CO	DDE

POLICY N	UMBER					EFFECTI	VE DATE NAM	MED INSURE	ED(\$)							
VEHICL	E DES	CRIPTIC	N													
VEH#	YEAR	MAKE:	CHEVROLET			於 於 VAN					VEHICLE		SYM / AC	ᄩ	C SYM	COLL SYM
6	1999		: UTILITY VAN			v.i.n.: 1GC	FC15M6X10	37615		PP	SPE	COML	ļ.,		1715	
GARAGIN	G	EET (Requ	uired in KY)		CITY	DUIC			SHEL				l_	STATE FN	3811	12
ADDRESS	P TEF		GVW / GCW	CLA	MEMI	SIC	FACTOR	SEAT CP	RADIUS	D 1	FARTHE	ST TERMINAL			OST NEW	·
STATE	001	KK	5000	01499	.	310	PACION	SEAT OF	I		ARTIL	01 12.4		40	000	-
USE	001	COM		CHECK		DD'L NO-	UNDRINS	F	LSP	1	RENT	DEDUCTIBLES	1.		COMP/ OTC	SPEC C OF L
	ASURE	RETA		COVERAGES	#	AULT V	MOTOR	FT	✓ COMF	,/ 	REIMB FG			т \$ 5		
FAR	-	Z SERV		NO-		NINS OTOR	& LABOR SPEC C OF L	FTW	COLL			\$	1	s 1		COLL
DRIVE TO		1	5 MILES 15 MILI	FAULT ES + NET		OTOK	I COLL	<u>L</u>				TOTAL PREM:	\$			•
VEH#	YEAR	MAKE	CHRYSLER	Dan	//\.	BODY VAN					VEHICLE	TYPE	SYM / A	≆ Ç	OMP / C SYM	COLL
7	2001		L: VOYAGER	J. 1. 2. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.			GJ25GX1B1	04515		PP	SPE	с 🚺 сомь				•,
GARAGIN	STR		uired in KY)	· .	CITY	***************************************			COUNTY	,			<u>'</u>	STATE	ZIP	
ADDRES					MEM	PHIS			SHEL	BY			-	ΓN	3811	12
STATE	TEI	RR	GVW / GCW	CL/	ss	SIC	FACTOR	SEAT CP	RADIUS		FARTHE	ST TERMINAL			OST NE	W
TN	001			7398				7	L					•	,920	
USE	,	COM	IM'L FOR HIRE	CHECK	AI S F	DD'L NO-	UNDRINS MOTOR	F	LSP		RENT REIMB	DEDUCTIBLES	AC	v √	COMP/ OTC	SPEC C OF I
PLE	ASURE	RET	AIL	V LIAB	✓ м	IED PAY	TOWING & LABOR	FT	✓ SOME	P/	FG	AA	ST AM	1T \$ 5	00	
FAR	t t	SER	VICE	NO- FAULT	√ W	NINS IOTOR	SPEC C OF L	FTW	COLL	.		\$	···	\$ 1	00	COLL
DRIVE TO WORK /	CHOOL	< 1	IS MILES 15 MIL	ES + NET	VEH CR:							TOTAL PREM:			oun /	6011
VEH#	YEAR	MARKE	: FORD			PSME: BUS					VEHICLE		SYM / A	SE OT	OMP / C SYM	SYM
8	2002		L: SHUTTLE BUS			V.I.N.: 1FD	WE35L72H/	A1291		PP	SPE	C COML	<u>.l</u>		Tain	
GARAGII	NG	EET (Req	uired in KY}		CITY				COUNTY				I.	STATE	381	10
ADDRES			I · · · · · · · · · · · · · · · · · · ·		MEM		T ELOTOD	SEAT CP	SHEL	.BY	CADTUE	ST TERMINAL		TN	OST NE	
LIC STATE	TE	RR	GVW / GCW		ASS	SIC	FACTOR	15	I KADIUS		FARING	SI IERMINAL	1		,474	••
TN	001	/	1	6482	Δ	ויחטין אוס-	UNDRINS	15 F	LSP		RENT	DEDUCTIBLES		-	COMP/	SPEC
USE		CON		CHECK COVERAGE	<i> </i>	DD'L NO-	MOTOR	FT	/ сом		REIMB FG			AT \$ 5	OTC [C OF
	ASURE	RET	L	LIAB NO-		MED PAY ININS MOTOR	TOWING & LABOR SPEC C OF L	FTW	J COLI	\vdash		_ AA	31 A		1000	COL
PAR WORK 7			VICE 15 MILES 15 MIL	NO- FAULT LES + NET	VEH	MOTOR	COFL	1,144	V JOEL	<u> </u>		\$ TOTAL PREM	. \$, OL
WORK /:	SCHOOL YEAR		DODGE	DR/	CR:	BODY VAN	(SEATS RE	EMOVED)			VEHICLE		SYM / A	GE C	OMP /	COLL SYM
9	2002	MICHAEL	L: MAXIWAGON				WB35Z02K			PP	SPE	· -		"	CŞIM	Şimi
	STE		uired in KY)		CITY	V.I.IV. 255			COUNT	<u> </u>				STATE	ZIP	
GARAGI ADDRES					MEM	IPHIS			SHEL	.BY				TN	381	12
STATE	TE	RR	GVW / GCW	CL	ASS	SIC	FACTOR	SEAT CP	RADIUS	1	FARTHI	ST TERMINAL			COST NE	W
TN	001		5000	6482				0	<u>L</u>	1				•	,092	
USE		cor	MM'L FOR HIRE	CHECK	S A	ADD'L NO-	UNDRINS MOTOR	F	LSP		RENT REIMB	DEDUCTIBLE			COMP/ OTC	SPEC C OF
PLE	ASURE	RET	TAIL	LIAB		MED PAY	TOWING & LABOR	FT	✓ SOM	IP/	FG	AA	ST A	ViT \$		
FAF	i	Y .	RVICE	NO- FAULT		JNINS MOTOR	SPEC C OF L	FTW	√ corr	L		\$		\$	1000	COL
DRIVE T	O SCHOOL	<	15 MILES 15 MII	LES + NET	VEH CR:							TOTAL PREM		==-	OHP /	COLL
VEH#	YEAR	MAKE	: FREIGHTLINER			BODY BU	**				VEHICL		SYM / A	GE 0	COMP / TC SYM	COLL SYM
110	12002	MODE	- 66 PASSENGER	RIJS		VIN 4U7	ZAAXBV32C	K01777		PP	SPI	EC COML	1			

STATE ZIP COUNTY STREET (Required in KY) CITY GARAGING ADDRESS ΤN 38112 **MEMPHIS** SHELBY COST NEW RADIUS FARTHEST TERMINAL SIC FACTOR SEAT CP TERR GVW / GCW CLASS STATE \$ 52,000 6484 66 TN 001 UNDRINS MOTOR TOWING & LABOR SPEC C OF L CHECK COVERAGES ACV COMP SPEC C OF L RENT REIMB ADD'L NO-FAULT DEDUCTIBLES LSP USE COMM'L FOR HIRE COMP FG STAMT \$ 500 PLEASURE FT RETAIL AA LIAB MED PAY NO-FAULT VEH DR / CR: UNINS MOTOR \$ 1000 FTW COLL FARM SERVICE COLL DRIVE TO WORK / SCHOOL < 15 MILES 15 MILES + TOTAL PREM: \$ © 1993-2009 ACORD CORPORATION. All rights reserved. ACORD 129 (2009/11) The ACORD name and logo are registered marks of ACORD

AĆ	OF) RD	®			\/E	-	E 00	AGENCY				L_144~		D#	TE (MM/DD	/ / ////)
	-					VE	:HICL	LE SC	MED	ULE							
AGENCY								CA	RRIER	·-·						NAIC CO	ODE
POLICY N	UMBEI	₹					EFFECT	IVE DATE NAI	MED INSURE	D(S)							
VEHICL	E DES	SCRI	PTION	<u> </u>													
VEH#	YEA			FREIGHTLINER			BODY BUS	5		· · · · · · · · · · · · · · · · · · ·		VEHICLE	TYPE	SYM / /	AGE	COMP / OTC SYM	COLL
11	200	2 1	ODEL:	66 PASSENGER	R BUS		V.I.N.: 4UZ	AAXBV52CH	(01778		PP	SPE	COML				
GARAGIN ADDRESS	GI	REET	(Requi	red in KY)		MEM	PHIS			SHEL	BY				STAT	TE ZIP 3811	12
LIC STATE	T	ERR		GVW / GCW	CL	ASS	SIC	FACTOR	SEAT CP	RADIUS		FARTHE	ST TERMINAL			COST NEV	W
TN	00	1			6484				66	L	<u>ļ.,</u>	SENT	T		\$ 5	52,000	lener
USE		✓	COMM	FOR HIRE	CHECK	:S A	DD'L NO-	UNDRINS MOTOR	F	LSP		RENT REIMB	DEDUCTIBLES		'CV	COMP/ OTC	SPEC C OF L
	SURE		RETA	ĻJ	LIAB NO-		ED PAY	& LABOR	FT	✓ COMP	"⊢	FG	_ AA	STA		500 1000	
FARI			SERVI		FAULT	VEH	ININS IOTOR	SPEC C OF L	FTW	COLL			S TOTAL PREM:	. •	\$	1000	COLL
DRIVE TO	1		٠		ILES + NET	ČŘ:	PORV				*****	151001 F	[SYM /	AGE	COMP / i	COLL
VEH#	YEA	"	,	FREIGHTLINER			POPE: BUS		UE0000		РР	VEHICLE		311117	AGE.	COMP / OTC SYM	SYM
12	200			48 PASSENGER		СПҮ	V.I.N.: 4UZ	AAXCSX5CI	N52002	COUNTY	11.1]	V OOME	1	STA	TE ZIP	
GARAGIN ADDRESS	IG	KEEI	(Nequi	reu iii Krj			IPHIS			SHEL					TN	3811	12
STATE		ERR		GVW / GCW	CI	ASS	SiC	FACTOR	SEAT CP	RADIUS	<u> </u>	FARTHE	ST TERMINAL			COST NE	
TN	00				6483	3	DDII NO 1 4		48	L		RENT	DEDUCTION TO	e I I.		57,000	ISPEC
USE		\checkmark	COM	₩	CHECK	:s	DD'L NO-	UNDRINS MOTOR TOWING	F	LSP		REIMB	DEDUCTIBLES		VCV	COMP/ OTC	SPEC C OF L
	ASURE		RETA		LIAB NO-		MED PAY	& LABOR	FT	✓ SPMI	1	FG	_ AA	STA	-	500	
FAR		ᆛᆛ	SERV		FAULT	· VEH	ININS MOTOR	SPEC C OF L	FTW	COLL	.		\$ TOTAL PREM	. •		1000	COLL
DRIVE TO WORK /S	YEA				ILES + DE	VEH CR:	BODY OAF	2003/441				VEHICLE		SYM /	AGE	COMP / OTC SYM	COLL
13	200	_		FORD			POPE: CAF	NA24W16D	A 20E 4 E		PP	SPE				OTC SYM	SYM
13			~~~~~	ECONOLINE		CITY	V.I.N.: 1F1	NAZ4VV IOD.	A30313	COUNTY		1 0. 2	V 00	.l	STA	TE ZIP	
GARAGII ADDRES	₩G -	II	(itequ	ned in tery			(PHIS			SHEL					TN	1	
LIC		ERR		GVW / GCW	C	ASS	sic	FACTOR	SEAT CP	RADIUS	T	FARTHE	ST TERMINAL			COST NE	w
TN	00	1		8,600	0149	99				L					\$ 2	20,001	
USE			COM		CHECK COVERAGE	EG (ADD'L NO-	UNDRINS MOTOR	F	LSP		RENT REIMB	DEDUCTIBLE	S ,	ACV.	COMP/	SPEC C OF I
PLE	ÄSURE	П	RETA	,ı_	LIAB	1 71	MED PAY	TOWING & LABOR	FT	✓ SOM	P/	FG	AA			s 500	
FAR	M	V	SERV	ICE	NO- FAUL	Ţ	UNINS MOTOR	SPEC C OF L	FTW	√ co⊓			\$		[\$ 1000	COLI
ROKE T	СНОС	ı	< 15	MILES 15 M		CR:							TOTAL PREM	l: \$			
VEH #	YE/		MAKE:	FORD			POPE CA	RGO VAN				VEHICLE	TYPE	SYM /	AGE	COMP / OTC SYM	COLL SYM
14	200)6	MODEL	ECONOLINE C	ARGO VAN		V.I.N.: 1FT	NE24W36D	A630516	_	PP	SPE	C COML				
GARAGI ADDRES	NG	TREE	Γ (Requ	ired in KY}		CITY				SHEL					TN	ATE ZIP	
STATE	- 1	FERR		GVW / GCW	С	LASS	SIC	FACTOR	SEAT CP	RADIUS		FARTH	ST TERMINAL			COST NE	W
	00)1	ļ	8,600	0149	99				L					1 -	20,001	,
USE			COM	M'L FOR HIRE	CHECK	ES	ADD'L NO-	UNDRINS MOTOR	F	LSP		RENT REIMB	DEDUCTIBLE			✓ COMP/ OTC	SPEC C OF
PLE	ASURE		RETA	AIL	✓ LIAB		MED PAY	TOWING & LABOR	FT	√ Saw	P/	FG	AA	ST		\$ 500	
FAF		V	SERV	/ICE	NO- FAUL	т 🗸	UNINS MOTOR	SPEC C OF L	FTW	COTI			\$		$\perp \! \! \perp$	\$ 1000	COL
DRIVE T					MILES + NE	T VEH / CR:	1				<u></u>		TOTAL PREM		155	COUD /	COLI
VEH#		F		FORD				RGO VAN			<u></u>	VEHICLI		SYM	AGE	COMP / OTC SYM	COLL
15	20	J6	MODE	.: ECONILINE CA	ARGO VAN		V.I.N.: 1FT	NE24WX6D	A30514		PP	SPE	C COMP			<u> </u>	<u> </u>

ACORD 129 (2009/11)

PLEASURE

FARM

DRIVE TO WORK / SCHOOL

GARAGING

ADDRESS

STATE

TN

USE

STREET (Required in KY)

COMM'L

RETAIL

SERVICE

< 15 MILES

TERR

001

GVW / GCW

FOR HIRE

15 MILES +

8,600

FARTHEST TERMINAL

DEDUCTIBLES

TOTAL PREM: \$

AA

RENT REIMB

FG

STATE ZIP

\$ 20,001

ACV COMP.

\$ 1000

38112

COLL

COST NEW

ΤN

ST AMT \$ 500

FACTOR

UNDRINS MOTOR TOWING & LABOR

SPEC C OF L SEAT CP

FT

FTW

CITY

CLASS

01499

CHECK COVERAGES

LIAB

NO-FAULT

NET VEH DR / CR:

MEMPHIS

SIC

ADD'L NO-FAULT

MED PAY

UNINS MOTOR COUNTY

RADIUS

LSP

COMP/ OTC

COLL

SHELBY

ĄĆ	OR	D®					VE	HIC	;L	E SC			сиsто	-	1D:				D	ATE (MM/DI	D(YYYY)
AGENCY											RRIER									NAIC C	ODE
POLICY N	UMBER							EFFE	CTIVI	E DATE NAM	IED INS	URED	D(S)								
VEHICL VEH #	E DESC	-		TUNES				BODY D	LIC		··········			Т	VE	HICLE	TYPE	SYM /	AGE	COMP / OTC SYM	COLL SYM
16	2002		FREIGH		BIIS			POPE: B		AXBV42CJ	64979			F	эр Г	SPEC				OTC SYM	SYM
GARAGIN ADDRESS	G STR		quired in KY)	JENGER	500	- 1	CITY MEMI			1,100	010.0		COUN			1	IV	!	STA	TE ZIP 381	12
STATE	TER	ir	GV	/W / GCW		CLA:		SIC		FACTOR	SEAT	CP	RADIU:	3	FA	ARTHE	ST TERMINAL			COST NE	w
TN	001		ļ		1 1	3483				<u> </u>	42		L					- 1 1		45,000	lepec
USE	,	Co	MM'L F	OR HIRE	COVE	K RAGES	Al F	OD'L NO- AULT	✓	UNDRINS MOTOR	F		/ CO		REN	ИB	DEDUCTIBLE	الــــا	ACV		SPEC C OF L
	SURE -	_	TAIL			LIAB NO-		ED PAY	\vdash	TOWING & LABOR SPEC	FT	- 1	✓ ŏĭ	≎	FG		AA	ST	-	\$ 500 \$ 1000	COLL
FARI			RVICE 15 MILES	15 MILE	1	NET V		NINS OTOR	LL.	SPEC C OF L	FI	w,	V 00		<u> </u>		\$ TOTAL PREM	I: \$	1	\$ 1000	COLL
DRIVE TO WORK 78	YEAR	┸┯┸┷		15 MILE	-5 +	DR/C	R:	BODY E	e Lis					T	VE	HICLE		SYM	AGE	COMP / OTC SYM	COLL
17	2002		E: FORD	SENGER	F450			TYPE: 4	,00	***************************************				+-,	PP P	SPE				OICSIM	3184
GARAGIN	STR		quired in KY)	-			CITY	V.,,					COUN	TY					ST/	TE ZIP	
ADDRESS							MEM	PHIS					SHE	LBY					TN		
STATE TN	TEI 001	RR	G	VW / GCW	6	CLA 6483	SS	SIC		FACTOR	SEAT 35	CP	RADIU 	S			ST TERMINAL		\$	COST NE 40,000	
USE	•	/ co	MM'L	FOR HIRE	CHEC	CK ERAGES	A A	DD'L NO- AUI,T	V	UNDRINS MOTOR	F		LS		REI		DEDUCTIBLE	——	ACV	COMP/ OTC	SPEC C OF L
PLE/	ASURE		TAIL			LIAB NO-		IED PAY		TOWING & LABOR SPEC	F	-		MP/	- FG		AA	ST		\$ 500 \$ 1000	
FAR DRIVE TO			RVICE 15 MILES	15 MIL	<u> </u>	NET V		ÖTÖR		C OF L		W .	√ co	L.L.			\$ TOTAL PREM	4∙ \$		\$ 1000	COLL
DRIVE TO WORK 75 VEH #	YEAR		E: FORD	13 WILL	L3 7	DR/C	R:	BODY TYPE: E	RUS						V	EHICLE			/ AGE	COMP / OTC SYM	COLL
18	2003		EL 30 PAS	SENGER	E450					VE45F93HI	B1362	5		1	PP	SPE	с 🗸 сомі	.		0.00	
GARAGIN	STE		equired in KY)			-	CITY						COUN	TY			1		1 "	ATE ZIP	
ADDRES							MEM	PHIS						LBY					TN		
STATE		RR	G	VW / GCW		CLA	SS	SIC		FACTOR	SEAT	CP	RADIU	S	F	ARTHE	ST TERMINAL			40,000	EW
TN	001	/			CHE	6483 ck		DD'L NO-		UNDRINS	30 		LS		REI	NT .	DEDUCTIBLE	ES	1 7	COMP.	SPEC C OF I
USE	ASURE	✓ cc	TAIL TAIL	FOR HIRE	COV	ERAGES	³├ ─ ∦ F	AULT	Y	MOTOR TOWING & LABOR	H	,	7 cc	MP/	REI		AA	ST	AMT	\$ 500	LC OF E
FAR	ŀ		RVICE			LIAB NO- FAULT		MED PAY ININS MOTOR		& LABOR SPEC C OF L	\vdash	TW	V 07	LL			\$	1	,	\$ 1000	COLI
WOKE T			< 15 MILES	15 MIL		NET N		MOTOR		COFE							TOTAL PRE	M: \$	··········		
VEH#	YEAR	MAM	CE: CHEVE	ROLET				PPP:	BUS						٧	EHICLE	TYPE	l l	/ AGE	COMP / OTC SYM	COLL SYM
19	2003	MOL	DEL: G3500	EXPRES	5 24 F	ASSE	NGER	V.I.N.:	1GBJ	IG31U6311	13991				PP	SPE	с 🗸 сом	L]	
GARAGI ADDRES	NG	REET (R	equired in KY	}			CITY MEN	1PHIS					SHI	ity ELBY	1				TI		
LIC	TE	RR	G	VW / GCW		CL	ASS	SIC		FACTOR	SEAT	CP	RADIL	JS	F	ARTH	EST TERMINAL	•		COST N	
TN	001		<u> </u>			6483			- - - -	6483	24		L,		RE	NIT	DEDUCATE:	E¢ l	1 -	52,000	
USE		V	OMM'L	FOR HIRE	COV	CK ERAGE		ADD'L NO FAULT		UNDRINS MOTOR TOWING	F		LS C		RE	IMB	DEDUCTIBL			COMP OTC \$ 500	/ SPEC C OF
	ASURE		ETAIL		Y	LIAB NO-		MED PAY	\vdash	TOWING & LABOR SPEC C OF L	\vdash	TW		OMP/	FG		S AA	81	AMT	\$ 1000	COL
DRIVE T	O SCHOOL		< 15 MILES	15 MII	LES +	FAULT NET DR/	XEH T	UNINS MOTOR		COFL			V °				TOTAL PRE	M; \$			JUL
WORK /		_	KE: DODG			DR /	UK:	BODY	SER'	VICE VAN					٧	EHICL	E TYPE		/ AGI	COMP / OTC SYN	COLL
1	1							1						_	_{Тър.} Г		-c [7] com			1	1

•••							1			ь,				+			DENT				I C	OMP/	SPEC
JSE		,	/	COMM	1,r	FOR HIRE	COV	CK /ERAGES		DD'L NO-	✓	UNDRINS MOTOR	F	_	LSP		RENT REIMB	DEDUCTIE		ACV		OMP/	SPEC C OF L
	PLEAS	SURE		RETA	IL		V	LIAB		MED PAY		TOWING & LABOR	FT	✓	COMP/		FG	AA		ST AMT			
	FARM			SERV	ICE	•		NO- FAULT	√ ¼	ININS MOTOR		SPEC C OF L	FTW	✓	COLL			\$			\$ 10	00	COLL
ZIZI)	ξξ.Τ§ α	HOOL	Τ.	< 15	MILES	15 MIL	E\$ +	NET Y	EH R:									TOTAL PE	REM: \$				
	Н#	YEAR	1	MAKE:	CHE/	/ROLET				段 股 B	US						VEHICLE	TYPE	S	YM / AGI	- GF8	MP/ SYM	COLL SYM
19	l	2003	3 1	MODEL	: G350	0 EXPRES	5 24	PASSEN	IGER	V.I.N.: 10	GBJ	G31U63111	3991			PP	SPE	co 🗸 co	ML				
	RAGINO	STF	REET	「(Requ	ired in K	(Y)			СПУ	.L					COUNTY					1		ZIP	
	RE\$S	'							MEN	1PHIS					SHELE	3Y				T	V	3811	2
e LI	CE	TE	RR	T		GVW / GCW		CLA	SS	SIC	-	FACTOR	SEAT C	7	RADIUS		FARTHE	ST TERMIN	AL		-	ST NEV	٧
TN		001		Ì				6483				6483	24	ļι	.					\$	52,		
USI	Ė		J	СОМІ	M'L	FOR HIRE	CH	ECK VERAGES	1	ADD'L NO- AULT	V	UNDRINS MOTOR	F	1	LSP		RENT REIMB	DEDUCTI	BLES	ACV	V	OMP/	SPEC C OF L
	PLEA	SURE	Ť	RETA	JL 🗀		J	LIAB		MED PAY		TOWING & LABOR	FT		COMP/		FG	AA		ST AMT	\$ 50	00	
	FARM	,		SERV	ICE	_	_	NO- FAULT	J :	UNINS MOTOR		SPEC C OF L	FTW	V	COLL			\$			\$ 10	000	COLL
DR.	VE TO	CHOOL	1	< 1.	5 MILES	15 MI	LES +	1					· · · · · · · · · · · · · · · · · · ·					TOTAL P	REM: S	6			
	EH#	YEAF		MAKE:	DOD	GE				BODY S	ER	VIÇE VAN					VEHICLE	TYPE	s	YM / AG	ေ န	MP/ SYM	COLL SYM
20		199	1	MODEL	.: RAM	WAGON B	350					VB35Z1MK	437290			PF	SPE	c 🖊 co	OML				
GA	RAGIN	ST	REE	T (Requ	ired in I	(Y)			CITY	·· ·······					COUNTY						TATE	ZIP	
	DRESS								MEN	/IPHIS					SHELE	3Y				T	N	3811	12
ST.	Ç ATE	TI	ERR			GVW / GCW		CLA	SS	SIC		FACTOR	SEAT C	P	RADIUS	,	FARTHE	ST TERMIN	IAL		C	OST NE	N
TN	1	001	1		5,00	00		01499	9					l	-					\$			
US	E		J	СОМ	M'L	FOR HIRE	CH	ECK VERAGES		ADD'L NO- FAULT	V	UNDRINS MOTOR	F		LSP		RENT REIMB	DEDUCTI	IBLE\$	AC\	<u> </u>	COMP/ OTC	SPEC C OF L
	PLEA	SURE	Ť	RETA	AIL		J	LIAB		MED PAY		TOWING & LABOR	FT		COMP	'	FG	_ AA		ST AM	\$		
	FARM	4		SER	/ICE	 ⊒		NO- FAULT	V	UNINS MOTOR		SPEC C OF L	FTV	<i>i</i> [COLL			\$			\$		COLL
DR	IVE TO	СНООІ		< 1	5 MILES	S 15 M	LES +		ÆH :R:									TOTAL P	REM:	\$			·
						''																	
A	ORD	129 (200	9/11)											© 1	993-	-2009 ACC	RD COR	PORA	TION.	All rig	hts re	served.
		1						The A	COR	D name a	nd	logo are re	egistere	d n	arks of	ACO	RD						

ACORD"

L	ORI	*		VEH	HCLE	E SC	HED	ULE	!				DATE (MM/D	D/YYYY)
AGENCY	-					CAF	RRIER		-			. <u>.</u> l	NAIC (ODE
POLICY N	UMBER				EFFECTIVE	DATE NAM	ED INSUREI	D(S)						
	E DESC	RIPTION											COMP	COLL
VEH#	YEAR	MAKE: CHEVROLET			默 BUS				\ 	/EHICLE TO	YPE COML	SYM / AGE	COMP / OTC SYM	COLL SYM
21	2002	MODEL: G3500 EXPR	RESS 24 PASSEI	NGER V.I.I	N.: 1GBJG	31R12116	0131	COUNTY	PP	SPEC	COME	ST	ATE ZIP	<u> </u>
GARAGIN ADDRESS	G	ET (Required in KY)		MEMPH	IIS			SHELE			1.50	TI	V 381	
STATE	TERI	GVW/G		uss	SIC	FACTOR	SEAT CP	RADIUS		FARTHEST	TERMINAL		52,000	:W
TN	001		6483	1 4000	NO #	INDDING	24	L	RF	NT I	DEDUCTIBLES	\$	· · · · · · · · · · · · · · · · · · ·	I ISPEC
USE	✓	COMM'L FOR HI	COVERAGE	<i>y</i>	1 3	JNDRINS MOTOR TOWING	F F	LSP COMP.	RE	IMB _		ST AMT	COMP/ OTC	SPEC C OF L
FAR	ASURE	RETAIL SERVICE	LIAB NO-	V MED UNINS	PAY L 8	S LABOR SPEC C OF L	FTW ,	COMP.	H.,		_ AA 5	3 F AWIT	s 1000	COLL
DRIVE TO WORK / S			5 MILES + NET	<u> ▼ MOTO</u> VEH	OR C	COFL	1,111	V 30	L		TOTAL PREM:	\$		- 0022
WORK / S	YEAR	MAKE: CHEVROLET			PE VAN					/EHICLE T	YPE	SYM / AGI	COMP / OTC SYM	COLL
22	1998	MODEL: MINI-VAN	 		n.: 1GNDU	J06E8WD2	269056		PP	SPEC	COML		01001111	0.111
GARAGIN	STRE	ET (Required in KY)		CITY				COUNTY				Sī	TATE ZIP	·
ADDRESS				MEMPH	lIS			SHELI	BY			T	N 381	12
LIC STATE	TER	R GVW/G	CW CL	ASS	SIC	FACTOR	SEAT CP	RADIUS		FARTHEST	TERMINAL		COST N	EW
TN	001		6481			···	7	<u>L</u>			·	\$	LICOMP	l leber
USE	¥	COMM'L FOR H	IRE CHECK COVERAGE	s ADD'L	Τ 💟 Ι	UNDRINS MOTOR	F	LSP	L R	EIMB _	DEDUCTIBLES	ACV	F-1 010	SPEC C OF L
PLE/	ASURE	RETAIL	LIAB	MED	PAY {	TOWING & LABOR	FT	COMP	" FO	}	_ AA	ST AMT		
FAR		SERVICE	NO- FAULT		ồR ί	SPEC C OF L	FTW	COLL			\$	•	\$	COLL
DRIVE TO WORK TS			5 MILES + NET		NOV					VEHICLE T	TOTAL PREM:	SYM / AG	E COMP / OTC SYM	COLL
23	YEAR 2008	MAKE: DODGE			船. MINI-V .N.: 1D8HN		7070		РР	SPEC	COML	0177.0	OTC SYM	SYM
	STOP	MODEL: CARAVAN		CITY	.N.: TOOTHY	144000011	1013	COUNTY			V	S	TATE ZIP	<u> </u>
GARAGIN ADDRES	VG			MEMPH	HIS			SHEL	BY			T	N 381	
TIC V	TER	R GVW/G	CW CL	ASS	SIC	FACTOR	SEAT CP	RADIUS		FARTHES	T TERMINAL		COST N	EM
STATE		· ·	0.404	· ·		FACTOR		1				1.		
TN	001		6481				5	L,	R	ENT T	DEDUCTIBLES	\$	18,999	SPEC
USE	001	COMM'L FOR H	IRE CHECK COVERAGE	S ADD'	LNO-	UNDRINS MOTOR	5 F	L LSP	R	ENT EIMB	DEDUCTIBLES	ACV	18,999 V SOMP	SPEC C OF L
TN USE	001	COMM'L FOR H		S ADD' FAUL MED	L NO-	UNDRINS MOTOR TOWING & LABOR SPEC	5 FT FT	L LSP COMF	P/ R	EIMB G	AA		18,999 ✓ COMP \$ 500	
TN USE PLE FAR	001	COMM'L FOR H	IRE CHECK COVERAGE LIAB NO- FAULT	S ADD' FAUL MED UNIN MOT	L NO-	UNDRINS MOTOR TOWING & LABOR	5 F	L LSP	P/ R	EIMB G	* AA **	ST AM	18,999 V SOMP	SPEC C OF L
TN USE PLE FAR DRIVET	001 ASURE	COMM'L FOR H RETAIL SERVICE < 15 MILES	IRE CHECK COVERAGE LIAB NO-	S ADD' FAUL MED UNIN MOT	L NO .T PAY IS OR	UNDRINS MOTOR TOWING & LABOR SPEC C OF L	5 FT FT	L LSP COMF	P/ R	EIMB G	S TOTAL PREM:	ST AM	18,999 COMP 500 \$ 1000	COLL
USE PLE FAR ORIVET VEH#	ASURE KM SCHOOL YEAR	COMM'L FOR H RETAIL SERVICE < 15 MILES MAKE: DODGE	IRE CHECK COVERAGE LIAB NO- FAULT	S ADD' FAUL MED UNIN MOT VEH	PAY IS OR MINI-V	UNDRINS MOTOR TOWING & LABOR SPEC C OF L	5 FT FTW	L LSP COMF	P/ R	EIMB G	\$ TOTAL PREM:	ST AM	18,999 OTC \$500 \$1000	COLL
USE PLE FAR WORK 7 VEH #	ASURE SCHOOL YEAR 2008	COMM'L FOR H RETAIL SERVICE < 15 MILES MAKE: DODGE	IRE CHECK COVERAGE LIAB NO- FAULT	S ADD' FAUL MED UNIN MOT VEH	L NO .T PAY IS OR	UNDRINS MOTOR TOWING & LABOR SPEC C OF L	5 FT FTW	L LSP COMF	PP	EIMB 3 VEHICLE T	\$ TOTAL PREM:	ST AMT	18,999 COMP 500 \$ 1000	COLL
USE PLE FAR ORIVET VEH#	ASURE SCHOOL YEAR 2008	COMM'L FOR H RETAIL SERVICE < 15 MILES MAKE: DODGE MODEL: CARAVAN	IRE CHECK COVERAGE LIAB NO- FAULT	ADD' FAUL MED UNIN MOT	PAY SOR MINI-V	UNDRINS MOTOR TOWING & LABOR SPEC C OF L	5 FT FTW	L LSP COMF	PP	EIMB 3 VEHICLE T	\$ TOTAL PREM:	ST AMT	18,999 COMP 500 \$ 1000 E COMP/ OTC SYM TATE ZIP N 38	COLL SYM
TN USE PLE FAR WORK 73 VEH # 24 GARAGII	ASURE SCHOOL YEAR 2008	COMM'L FOR H RETAIL SERVICE < 15 MILES MAKE: DODGE MODEL: CARAVAN EET (Required in KY)	IRE CHECK COVERAGE LIAN LIAN LIAN LIAN LIAN LIAN LIAN LIA	S ADD'S FAUL MED JUNIN MOT VEH CITY MEMPH ASS	PAY SOR MINI-V	UNDRINS MOTOR TOWING & LABOR SPEC C OF L	5 FT FTW 17880	L LSP COMP OTC COLL	PP	VEHICLE T	\$ TOTAL PREM:	ST AMT	18,999 COMP/ \$ 500 \$ 1000 E COMP/ OTC SYM TATE ZIP N 38*	COLL SYM
USE PLE FAR WORK 19 VEH # 24 GARAGII ADDRES	ASURE SCHOOL YEAR 2008	COMM'L FOR H RETAIL SERVICE < 15 MILES MAKE: DODGE MODEL: CARAVAN EET (Required in KY)	CHECK COVERAGE CIME CIME	S. ADD' FAUL V MED V UNIN MOT VEH: V: CITY MEMPI ASS	PAY IS SIC	UNDRINS MOTOR TOWING & LABOR SPEC C OF L /AN N44H78B1	5 FT FTW	L LSP COMF	PP BY	VEHICLE 1 SPEC	S TOTAL PREM: TYPE COML	ST AMT	18,999 COMP S 500	COLL SYM 112
PLE FAR PRIVET WORK 124 GARAGII ADDRES LIC STATE	ASURE SCHOOL YEAR 2008	COMM'L FOR H RETAIL SERVICE < 15 MILES MAKE: DODGE MODEL: CARAVAN EET (Required in KY)	IRE CHECK COVERAGE LIAB NO- FAULT 15 MILES + BET 6481	S. ADD' FAUL V MED V UNIN MOT VEH: V: CITY MEMPI ASS	PAY IS OR INIT 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	UNDRINS MOTOR TOWING & LABOR SPEC C OF L /AN V44H78B1 FACTOR UNDRINS MOTOR	5 FT FTW 17880 SEAT CP 5	L LSP COMFOTC COLL COUNTY SHEL RADIUS L	PP RR	VEHICLE T SPEC FARTHES	S TOTAL PREM: TYPE COML TTERMINAL DEDUCTIBLES	ST AM1 \$ SYM / AG ST AM1	18,999 COMP S 500 S 1000 S 1000 TATE ZIP N 38 COST 18,999 COMF COLL SYM 112	
TN USE PLE FAR DRIVET' VEH # 24 GARAGII ADDRES LIC STATE TN USE	ASURE SCHOOL YEAR 2008	COMM'L FOR H RETAIL SERVICE < 15 MILES MAKE: DODGE MODEL: CARAVAN EET (Required in KY) RR GVW/C	CHECK COVERAGE LIAB NO 15 MILES + SET GCW CL 6481 HIRE CHECK COVERAGE LIAB	S ADD'S MED UNIN MOT VEH VI CITY MEMPH	L NO- V T PAY IS OR DDY MINI-V I.N.: 1D8HN HIS SIC	UNDRINS MOTOR TOWING & LABOR SPEC C OF L /AN V44H78B1 FACTOR UNDRINS MOTOR TOWING & LABOR	5 FT FTW 17880 SEAT CP 5 FT FT	L LSP COMPTY COLL COUNTY SHEL RADIUS L LSP COMO OTC	PP R R R R R R R R R R R R R R R R R R	VEHICLE T SPEC FARTHES	S TOTAL PREM: TYPE COML TTERMINAL DEDUCTIBLES AA	ST AMT	18,999 COMP S 500 S 1000 TATE ZIP N 38 COST 18,999 COMP OTC T \$ 500	COLL SYM 112 IEW
TN USE PLE FAR WOOKE VEH # 24 GARAGII ADDRES LIC STATE TN USE PLE FAF	ASURE SCHOOL YEAR 2008 NG STRIS TER 001 EASURE RM	COMM'L FOR H RETAIL SERVICE < 15 MILES MAKE: DODGE MODEL: CARAVAN EET (Required in KY) RR GVW / C COMM'L FOR H RETAIL SERVICE	GCW CLIAB GCW CLIAB GCW CLIAB GCW CLIAB GCW CLIAB GCW CLIAB GCW COVERAGE LIAB NO-FAULT	S ADD'S MED UNIN MOT VEH VI CITY MEMPH ASS	L NO- V T PAY IS OR DDY MINI-V I.N.: 1D8HN HIS SIC	UNDRINS MOTOR TOWING & LABOR SPEC C OF L /AN V44H78B1 FACTOR UNDRINS MOTOR TOWING	5 FT FTW 17880 SEAT CP 5	L LSP COMFOTC COLL COUNTY SHEL RADIUS L	PP R R R R R R R R R R R R R R R R R R	VEHICLE T SPEC FARTHES	S TOTAL PREM: TYPE COML TERMINAL DEDUCTIBLES AA \$	ST AM1 ST AM1 ST AM1 ST AM1 ST AM1 ST AM1	18,999 COMP S 500 S 1000 S 1000 TATE ZIP N 38 COST 18,999 COMF COLL SYM 112	
TN USE PLE FAR DRIVET VEH# 24 GARAGII ADDRES STATE TN USE PLE FAF DRIVET	ASURE SCHOOL YEAR 2008 TER 001 FASURE RM SCHOOL STRING S	COMM'L FOR H RETAIL SERVICE < 15 MILES MAKE: DODGE MODEL: CARAVAN EET (Required in KY) RR GVW / G COMM'L FOR H RETAIL SERVICE < 15 MILES	GCW CLIAB GCW CLIAB GCW CLIAB GCW CLIAB GCW CLIAB GCW CLIAB GCW COVERAGE LIAB NO-FAULT	S ADD' MED UNIN MOT VEH.	PAY SOR MINI-V	UNDRINS MOTOR TOWING & LABOR SPEC C OF L /AN V44H78B1 FACTOR UNDRINS MOTOR TOWING & LABOR SPEC C OF L	5 FT FTW 17880 SEAT CP 5 FT FT	L LSP COMPTY COLL COUNTY SHEL RADIUS L LSP COMO OTC	PP R R R R R R R R R R R R R R R R R R	VEHICLE 1 SPEC FARTHES ENT EIMB G	S TOTAL PREM: TYPE COML T TERMINAL DEDUCTIBLES AA \$ TOTAL PREM:	ST AMT	18,999 COMP S 500 S 1000 COMP OTC SYM TATE ZIP N 38 COST 18,999 COMP T 500 S 1000 S 1000	COLL SYM
TN USE PLE FAR DRIVET VEH # 24 GARAGII ADDRES TIN USE PLE FAR DRIVET WORK VEH #	ASURE SCHOOL YEAR 2008 TER 001 EASURE 2008 TER 001 YEAR 2001 YEAR 2001	COMM'L FOR H RETAIL SERVICE < 15 MILES MAKE: DODGE MODEL: CARAVAN EET (Required in KY) RR COMM'L FOR H RETAIL SERVICE < 15 MILES MAKE: DODGE	GCW CLIAB GCW CLIAB GCW CLIAB GCW CLIAB GCW CLIAB GCW CLIAB GCW COVERAGE LIAB NO-FAULT	S ADD UNIN MOT VEH STAUL MEMORY MEMORY MOT VI MOT VI MOT VI MOT VI MOT	PAY SIS OR MINI-V	WINDRINS MOTOR TOWING & LABOR SPEC C OF L /AN V44H78B1 FACTOR UNDRINS MOTOR TOWING & LABOR SPEC C OF L	5 FT FTW SEAT CP 5 FT FTW	L LSP COMPTY COLL COUNTY SHEL RADIUS L LSP COMO OTC	PP BY	VEHICLE 1 SPEC FARTHES ENT EIMB G	TOTAL PREM: TYPE COML TERMINAL DEDUCTIBLES AA S TOTAL PREM:	ST AM1 ST AM1 ST AM1 ST AM1 ST AM1 ST AM1	18,999 COMP S 500 S 1000 TATE ZIP N 38 COST 18,999 COMP TOTC S 500 S 1000 S 1000	COLL SYM
TN USE PLE FAR WORK VEH# 24 GARAGII ADDRES STATE TN USE PLE FAF DRIVET VEH# 25	ASURE SCHOOL YEAR 2008 NG STRIS TER 001 EASURE RM 9 SCHOOL YEAR 2008	COMM'L FOR H RETAIL SERVICE < 15 MILES MAKE: DODGE MODEL: CARAVAN EET (Required in KY) RR COMM'L FOR H RETAIL SERVICE < 15 MILES MAKE: DODGE MODEL: CARAVAN	GCW CLIAB GCW CLIAB GCW CLIAB GCW CLIAB GCW CLIAB GCW CLIAB GCW COVERAGE LIAB NO-FAULT	S ADDI MED UNIN MOT VEH SEN LAND UNIN MOT VE	PAY SOR MINI-V	WINDRINS MOTOR TOWING & LABOR SPEC C OF L /AN V44H78B1 FACTOR UNDRINS MOTOR TOWING & LABOR SPEC C OF L	5 FT FTW SEAT CP 5 FT FTW	L LSP COMPTY COLL COUNTY SHEL RADIUS L LSP COMO OTC	PP PP PP	VEHICLE 1 SPEC FARTHES ENT EIMB G	TOTAL PREM: TYPE COML TERMINAL DEDUCTIBLES AA S TOTAL PREM:	ST AM1 \$ SYM / AG \$T AM1 \$ SYM / AG \$T AM1	18,999 COMP S 500 S 1000 COMP OTC SYM TATE ZIP N 38 COST 18,999 COMP T 500 S 1000 S 1000	COLL SYM
TN USE PLE FAR DRIVET VEH # 24 GARAGII ADDRES TIN USE PLE FAR DRIVET WORK VEH #	ASURE VEAR 2008 TEF 001 CASURE VEAR 2008 TEF 001 CASURE VEAR 2008 SCHOOL VEAR 2008 ING STRING	COMM'L FOR H RETAIL SERVICE < 15 MILES MAKE: DODGE MODEL: CARAVAN EET (Required in KY) RR COMM'L FOR H RETAIL SERVICE < 15 MILES MAKE: DODGE	GCW CLIAB GCW CLIAB GCW CLIAB GCW CLIAB GCW CLIAB GCW CLIAB GCW COVERAGE LIAB NO-FAULT	S ADD'S MED UNIN MOT VEH STAUL MED UNIN MED	PAY SIC TINO- VIS OR SI	WINDRINS MOTOR TOWING & LABOR SPEC C OF L /AN V44H78B1 FACTOR UNDRINS MOTOR TOWING & LABOR SPEC C OF L	5 FT FTW SEAT CP 5 FT FTW	COUNTY LSP COMITY COLL COUNTY SHEL RADIUS L LSP COMITY COLL COUNTY COUNTY	PP BY	VEHICLE 1 SPEC FARTHES ENT EIMB G	TOTAL PREM: TYPE COML TERMINAL DEDUCTIBLES AA S TOTAL PREM:	ST AM	18,999 COMP S 500	COLL SYM
TN USE PLE FAR WORK VEH # 24 GARAGII ADDRES LIC STATE TN USE PLE FAR ORIVE T WORK 25 GARAGI ADDRES	ASURE VEAR 2008 TEF 001 CASURE VEAR 2008 TEF 001 CASURE VEAR 2008 SCHOOL VEAR 2008 ING STRING	COMM'L FOR H RETAIL SERVICE < 15 MILES MAKE: DODGE MODEL: CARAVAN EET (Required in KY) COMM'L FOR H RETAIL SERVICE < 15 MILES MAKE: DODGE MODEL: CARAVAN EET (Required in KY)	GCW CLECK COVERAGE LIAB L	S ADDI MED UNIN MOT VEH SEN LAND UNIN MOT VE	PAY SIC TINO- VIS OR SI	WINDRINS MOTOR TOWING & LABOR SPEC C OF L /AN V44H78B1 FACTOR UNDRINS MOTOR TOWING & LABOR SPEC C OF L	5 FT FTW SEAT CP 5 FT FTW	COUNTY SHEL RADIUS L SP COMB COLL	PP BY	VEHICLE 1 SPEC FARTHES ENT EIMB G VEHICLE SPEC	TOTAL PREM: TYPE COML TERMINAL DEDUCTIBLES AA S TOTAL PREM:	ST AM	18,999 COMP S 500 S 1000 S 1000 COMP OTC SYM 18,999 COMP OTC S 500 S 1000 S TATE ZIP OTC S 38 COMP OTC OT	COLL SYM 112 SPEC C OF I COLL SYM 112 I COLL SYM
TN USE PLE PRIVET PARTITION VEH # 24 GARAGII ADDRES LIC STATE TN USE PLE FAR DRIVET WORK VEH # 25 GARAGI	ASURE SCHOOL YEAR 2008 NG STRIS TER 001 EASURE RM 9 CHOOL YEAR 2008 SCHOOL YEAR 2008 SCHOOL YEAR 2008 SCHOOL YEAR 2008 SCHOOL YEAR 2008	COMM'L FOR H RETAIL SERVICE < 15 MILES MAKE: DODGE MODEL: CARAVAN EET (Required in KY) RR GVW / C COMM'L FOR H RETAIL SERVICE < 15 MILES MAKE: DODGE MODEL: CARAVAN EET (Required in KY) RR GVW / C	GCW CLECK COVERAGE LIAB L	S ADD' MED UNIN MOT VER! S ADD' FAU! VIII MED VI	PAY SOR MINI-V LINC. 1D8HN HIS SIC 1.NO-V LT OPAY SOR OR OPY MINI-V OPAY SOR OPAY SOR OPY MINI-V OPAY SOR OP	UNDRINS MOTOR TOWING & LABOR SPEC C OF L /AN V44H78B1 FACTOR UNDRINS MOTOR TOWING & LABOR SPEC C OF L VAN V44H98b11	5 FT FTW FTW FTW FTW FTW FTW	COUNTY SHEL COUNTY COLL COUNTY SHEL COUNTY COLL COUNTY SHEL	PP BY	VEHICLE 1 SPEC FARTHES ENT EIMB G VEHICLE SPEC	TOTAL PREMI: TYPE AA S TOTAL PREMI: TYPE AA S TOTAL PREMI: TYPE COML	ST AM	18,999 COMP S 500 S 1000 COMP OTC SYM TATE ZIP N 38 COST 18,999 COMP OTC S 500 S 1000 STATE ZIP N 38 COST S 500 S 1000 COMP OTC SYM STATE ZIP N 38 COST 18,999	COLL SYM 112 EW COLL COLL SYM
TN USE PLE FAR DRIVET VEH # 24 GARAGII ADDRES TATE TN USE PLE FAF DRIVET DRIVET STATE TN USE LIC STATE TN USE LIC STATE LIC STATE TN USE LIC STATE LIC STATE LIC STATE STATE LIC STATE STATE LIC STATE	ASURE SCHOOL YEAR 2008 NG STRIS EASURE RM SCHOOL YEAR 2008 SCHOOL YEAR 2008 TEIN SCHOOL YEAR 2008	COMM'L FOR H RETAIL SERVICE < 15 MILES MAKE: DODGE MODEL: CARAVAN EET (Required in KY) RR GVW / C COMM'L FOR H RETAIL SERVICE < 15 MILES MAKE: DODGE MODEL: CARAVAN EET (Required in KY) RR GVW / C	GCW CHECK COVERAGE CHECK COVERAGE NO-FAULT GARAGE CHECK COVERAGE C	S ADD' MED UNIN MOT VEH V. MEMPH ASS ADD' FAU UNIN MOT VEH V. MEMPH ASS ADD' FAU UNIN MOT VEH V. CITY MEMPH ASS ADD' FAU UNIN MEMPH ADD' FAU UNIN MEMPH ASS ADD' FAU UNIN MEMPH ADD' FAU U	PAY IS OR MINI-V LNC: 1D8HN HIS SIC ODY MINI-V LT PAY IS OR LT PAY IS OOR LT PAY IS OOR ODY MINI-V HIS SIC HIS SIC HIS SIC ODY HIS SIC	UNDRINS MOTOR TOWING & LABOR SPEC C OF L /AN V44H78B1 FACTOR UNDRINS MOTOR TOWING & LABOR SPEC C OF L /AN V44h98b11 FACTOR	5 FT FTW FTW FTW FTW FTW FTW FTW FTW FTW	COUNTY SHEL RADIUS COUNTY SHEL RADIUS L LSP COUNTY SHEL RADIUS L LSP LSP LSP LSP LSP LSP LSP LSP LSP	PP RR RR RR PP F PP P	VEHICLE 1 SPEC FARTHES ENT EIMB G VEHICLE SPEC	TOTAL PREMI: TYPE AA S TOTAL PREMI: TYPE AA S TOTAL PREMI: TYPE COML	ST AM1 \$ SYM / AG \$ SYM / AG \$ SYM / AG \$ SYM / AG \$ ACV \$ T \$ ACV \$ ACV \$ T \$ ACV \$ ACV \$ T \$ ACV \$ AC	18,999 COMP S 500 S 1000 S 1000 TATE ZIP N 38 COST N 18,999 COMP OTC SYM STATE ZIP N 38 COST N S 500 S 1000 S 500 S 1000 S 500 S 1000 S 500 S 700 COST N 18,999 COST N 18,999 COMP C	COLL SYM 112 EW COLL COLL SYM
TN USE PLE FAR WORK VEH # 24 GARAGII ADDRES LIC STATE TN USE PLE FAR DRIVE T WORK VEH # 25 GARAGIA ADDRES LIC STATE TN USE	ASURE SCHOOL YEAR 2008 NG STRIS EASURE RM SCHOOL YEAR 2008 SCHOOL YEAR 2008 TEIN SCHOOL YEAR 2008	COMM'L FOR H RETAIL SERVICE < 15 MILES MAKE: DODGE MODEL: CARAVAN SET (Required in KY) COMM'L FOR H RETAIL SERVICE < 15 MILES MAKE: DODGE MODEL: CARAVAN SET (Required in KY) MAKE: DODGE MODEL: CARAVAN SET (Required in KY)	CHECK COVERAGE CHECK SOVERAGE COVERAGE	S ADD UNIN MOT VEH VI VI VI VI MEMPI ASS SEL ADD V MOT VEH VI MOT VEH VEH VI MOT VEH VI MOT VEH VEH VI MOT VEH VEH VI MOT VEH	PAY IS OR INIT INIT INIT INIT INIT INIT INIT IN	UNDRINS MOTOR TOWING & LABOR SPEC C OF L /AN V44H78B1 FACTOR UNDRINS MOTOR TOWING & LABOR SPEC C OF L /AN V44h98b117 FACTOR UNDRINS MOTOR TOWING & LABOR SPEC C OF L	5 FT FTW SEAT CP 5 FT FTW FTW	COUNTY SHEL COUNTY SHEL COUNTY SHEL COUNTY SHEL COUNTY SHEL RADIUS L	PP RR RR RR PP F PP P	VEHICLE 1 SPEC FARTHES O SPEC FARTHES FARTHES	TOTAL PREM: TYPE COML TERMINAL DEDUCTIBLES AA S TOTAL PREM: TYPE COML	ST AM1 \$ SYM / AG \$ SYM / AG \$ SYM / AG \$ SYM / AG \$ ACV \$ T \$ ACV \$ ACV \$ T \$ ACV \$ ACV \$ T \$ ACV \$ AC	18,999 COMP S 500 S 1000 COMP OTC SYM A 38 COST N 18,999 COMP S 500 S 1000	COLL SYM 112 EW COLL COLL SYM
TN USE PLE FAR WORK VEH # 24 GARAGII ADDRES LIC STATE TN USE PLE FAR DRIVE T WORK VEH # 25 GARAGIA ADDRES LIC STATE TN USE PLE FAR DRIVE T WORK VEH # 25 GARAGIA ADDRES LIC STATE TN USE PLE FAR	SCHOOL YEAR 2008 TEF 001 SCHOOL YEAR 2008 TEF 001 SCHOOL YEAR 2008 ING STRISS TEI 001	COMM'L FOR H RETAIL SERVICE < 15 MILES MAKE: DODGE MODEL: CARAVAN EET (Required in KY) COMM'L FOR H RETAIL SERVICE < 15 MILES MAKE: DODGE MODEL: CARAVAN EET (Required in KY) RR GVW / G COMM'L FOR H RETAIL SERVICE < 15 MILES MAKE: DODGE MODEL: CARAVAN EET (Required in KY) RR GVW / G COMM'L FOR H FOR H RETAIL SERVICE COMM'L FOR H RETAIL SERVICE AND GVW / G COMM'L FOR H FOR H RETAIL SERVICE COMM'L FOR H FOR H RETAIL SERVICE AND GVW / G COMM'L FOR H FOR H RETAIL SERVICE AND GVW / G COMM'L FOR H FOR H RETAIL SERVICE AND GVW / G COMM'L FOR H FOR H RETAIL SERVICE AND GVW / G COMM'L FOR H FOR H RETAIL SERVICE AND GVW / G COMM'L FOR H FOR H RETAIL SERVICE AND GVW / G COMM'L FOR H FOR H RETAIL SERVICE AND GVW / G COMM'L FOR H FOR H RETAIL SERVICE AND GVW / G COMM'L FOR H FOR H RETAIL SERVICE AND GVW / G COMM'L FOR H FOR H RETAIL SERVICE AND GVW / G COMM'L FOR H FOR H RETAIL SERVICE AND GVW / G COMM'L FOR H FOR H RETAIL SERVICE AND GVW / G COMM'L FOR H FOR H RETAIL SERVICE AND GVW / G COMM'L FOR H FOR H RETAIL SERVICE AND GVW / G COMM'L FOR H FOR H RETAIL SERVICE AND GVW / G COMM'L FOR H FOR H RETAIL SERVICE AND GVW / G COMM'L FOR H FOR H RETAIL SERVICE AND GVW / G COMM'L FOR H RETAIL SERVICE AND GVW / G COMM'L FOR H COMM'L FOR	CHECK COVERAGE CHECK COVERAGE CHECK COVERAGE CHECK CHECK CHECK COVERAGE COVERAGE CHECK COVERAGE CHECK COVERAGE CHECK COVERAGE COVERAGE CHECK COVERAGE S ADD UNIN MOT VEH VI VI VI VI MEMPI ASS SEL ADD V MOT VEH VI MOT VEH VEH VI MOT VEH VI MOT VEH VEH VI MOT VEH VEH VI MOT VEH	PAY SIC	UNDRINS MOTOR TOWING & LABOR SPEC C OF L /AN V44H78B1 FACTOR UNDRINS MOTOR TOWING & LABOR SPEC C OF L /AN V44h98b11 FACTOR	5 FT FTW 17880 SEAT CP 5 FT FTW 7881	COUNTY SHEL RADIUS COUNTY SHEL RADIUS L LSP COUNTY SHEL RADIUS L LSP LSP LSP LSP LSP LSP LSP LSP LSP	PP BY FR RR RP PP FF	VEHICLE 1 SPEC FARTHES ENT EIMB G VEHICLE SPEC FARTHES	TOTAL PREM: TYPE COML T TERMINAL DEDUCTIBLES AA \$ TOTAL PREM: TYPE COML ST TERMINAL DEDUCTIBLES	ST AMT	18,999 COMP S 500 S 1000 S 1000 TATE ZIP N 38 COST N 18,999 COMP OTC SYM STATE ZIP N 38 COST N S 500 S 1000 S 500 S 1000 S 500 S 1000 S 500 S 700 COST N 18,999 COST N 18,999 COMP C	COLL SYM 112 EW COLL COLL SYM	

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VEHICLE	DESC	RIPTION						l		. J <u>.</u>											
VEH#	YEAR			ATIONAL				BODY TYPE: E							VEHICL			SYM / A	GE O	OMP / C SYM	COLL SYM
26	1996		····	SENGER	3000			v.l.n.: 1	HVBBAB	M7TH3	34682	9	COUNTY	PP	SP	EC 🗸 C	OML	- 1	STATE	710	
GARAGING ADDRESS		T (Require						PHIS			1		SHEL	вү		EST TERMI		I.	TN	3811	
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WORK / SU	YEAR			ATIONAL) DR/C	rc:	BODY E	BUS						VEHICL	E TYPE		SYM / A	GE C	OMP /	COLL
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GARAGING	STRE	ET (Requir	ed in KY)				СПҮ						COUNTY					-	STATE	1	4:0
ADDRESS						1		IPHIS	1	OTOD	- CEAT	CD	SHEL	BY	EADTL	EST TERMI	NAI		TN	381°	A-MARKET
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USE	- OO 1	COMM	F	OR HIRE		CK ERAGES		 NDD'L NO- AULT	/ UND	RINS FOR	F	+	LSP	╁	RENT REIMB	DEDUC	IBLES		cv I	COMP/	SPEC C OF L
PLEA	SURE	RETAI		•		LIAB		AULI MED PAY	TOV	VING NBOR	F	т ,	Z SOMI	7	FG	AA		ST A	MT \$	500	
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DRIVE TO WORK / SO	CHOOL	< 15	MILES	15 MIL	ES+	DET V										TOTAL	PREM:			oun (0011
VEH#	YEAR	MAKE:						BODY TYPE:	• • • • • • • • • • • • • • • • • • • •							LE TYPE		SYM / A	AGE O	OMP / TC SYM	COLL SYM
28	2001			A G3500	25 P/	ASSEN	GER CITY	V.I.N.:	1GDJG31	R1117	8636		COUNTY	Pf	SI	EC \	OML	<u> </u>	STATE	ZIP	
GARAGING ADDRESS	G	ET (Requir	eam Kt)					1PHIS					SHEL						TN	381	12
LIC	TER	R	G\	W/GCW		CLA		SIC	FA	CTOR	SEAT	ГСР	RADIUS	T	FARTI	HEST TERM	NAL			COST NE	:w
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PLEA	SURE	RETAI	L 📗		\checkmark	LIAB		MED PAY	& L/	VING ABOR	—	т ,	SOM OTC		FG	_ AA		ST A	MT \$		
FARM		SERVI	·		11			UNINS MOTOR	SPE C O	FL	F	TW ,	COLI	-]		\$	DDEII.	•	\$	1000	COLL
WORK TS	CHOOL		MILES	15 MII	LES +	DET.	R:	BODY	SERVICE	. VAN			·		VEHIC	TOTAL LE TYPE	PREM;	SYM / /		OMP /	COLL
29	1996	MAKE:	ECONO	INF				TYPE:	SERVICE	, VAIV				P		_	COML		"	TC SYM	SYM
GARAGIN	ETDE	ET (Requi					CITY	1 - 1111111					COUNT	7				•	STATI	E ZIP	
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STATE	TER	R		/W / GCW			ASS	SIC	F/	ACTOR	SEA	ГСР	RADIUS		FART	HEST TERM	INAL		4.	COST NO 7,970	EW
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USE	L CUIDE	COMN	<u> </u>	FOR HIRE	čo	ECK VERAGE	/	ADD'L NO FAULT	MO TO	DRINS TOR WING ABOR	F	т ,	LSP COM OTC	P/	RENT REIMB FG	Н	F		MT \$		lC OF I
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DRIVE TO			MILES	15 Mi	LES +	FAULT NET DR/	VEH VEH	MOTOR	1,100	JF L,	1		<u> </u>	[TOTAL	PREM:	\$			
VEH#	YEAR	MAKE:	FORD			DIC)	OK.	BODY TYPE:	BUS	-					VEHIC	LE TYPE		SYM /	AGE	COMP / OTC SYM	COLL
30	2003			UPER DI	UTY 3	0 PSG	₹		1FDWE4	5F03H	A1150)3		P	P S	PEC 🗸	COML	<u> </u>			
GARAGIN ADDRESS	IG	EET (Requ	ired in KY)				CITY MEN	ирніs					SHE						STAT TN	381	
STATE	TER	R	G	VW / GCW		1	ASS	SIC	F.	ACTOR		ТСР	RADIUS		FART	HEST TERN	INAL		,	COST N 3,000	EW
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DRIVE TO			MILES	15 M	ILES +	FAULT NET DR/	VEH .	MOTOR	C C	Jr L			V		<u> </u>		PREM	: \$			
WORK/S	JUNUUL					_ DR7	<u>νι.</u>														

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TOTAL PREM: \$

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COMMERCIAL AUTO DRIVER INFORMATION SCHEDULE

DATE 04/01/2010

				04/01/2010
PRODUCER	PHONE (A/C, No, Ext): FAX (A/C, No):	APPLICANT (First Named Insured)	SHELBY COUNTY GOVERNMENT DIVISION OF C SERVICES DBA SHELBY COUNTY HEAD START	OMMUNITY
		FOR COMPANY USE ONLY		
CODE:	SUB CODE:			
AGENCY CUSTOMER I	D:	<u> </u>		
DRIVER IN	FORMATION	·		

CODE:	SUB CODE:	<u> </u>											
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1	NAME (Include address, if required) ADRIAN MULLINS				EXP	LIC	92081222		HIRE	NO-PAUL		VEH#	USE
'		M		10/18/1983				TN					
2	AREMENTRA YOUNG	F		11/10/1957			58939927	TN					
3	BARBARA RUDD	F		07/03/1950			51023170	TN					
4	BEVERLY SULLIVAN	F		04/23/1949			46019130	TN					
5	ELESTER CHAMBERS	М		11/12/1959			55443581	TN					
6	EXIE STEVENSON	F		09/20/1966			91821281	TN					
7	GEORGE HUDSON	М		01/09/1953			43676245	TN					
8	GRETA MATTHEWS	F		05/29/1968			65953421	TN					
9	SHONDA RENEE MORROS	F		06/15/1977			115807099	TN					
10	LAURA LOVE	F		05/01/1961			061570837	TN					
11	LEONARD LAWSON	М		10/18/1950			39215896	TN					
12	MAGGIE TIPTON	F		02/12/1952			43573837	TN					
13	MARY PILOT	F		10/07/1946			30872258	TN					
14	HOSEA PATTERSON	М		02/12/1974			075803991	TN					
15	RONALD BROWN	М		07/21/1951			108897937	TN					
16	WALTER MISTER	М		01/03/1950			51710007	TN					
17	PATRICIA MAXWELL	F		06/17/1950			45106543	TN					
18	RICHARD HAYNES	M	I	01/16/1950			42647721	TN					
19	SAMUEL HURNS, III	M	ı	11/09/1964			59130714	TN					
20	SHIRLEY DAVIS	F		02/03/1954			50185745	TN					
21	SONJA BOYD	F		10/05/1971			73883482	TN					
22	SANDRA CUMMINGS	F		11/12/1951			67276981	TN					
23	LATONYA DOTSON	F		11/13/1974			07685047	TN					
24	MARIA PATTERSON	F	:	08/08/1959			068860083	TN					

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COMMERCIAL AUTO DRIVER INFORMATION SCHEDULE

DATE 04/01/2010

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	NAME (Include address, if required) JAMES SANDERS		STAT		EXP	LIC	115570391	TN	HIRE NO-FAOL	VEH :	F USE
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ATTACHMENT 4 SHELBY COUNTY HEAD START BUSINESS AUTOMOBILE COVERAGE LOSS INFORMATION

Date: April 19, 2010

Customer Loss Detail Report 1 of 2 (By Account/Policy Number/Claim Number)



Account:

Page:

75181

Shelby Co. Govt., Div. of Comm. Services

Policy:	PHPK128205	07/01/2005 -	07/01/2006						
Claim Nun PHNP05	nber 100194898		Status	Loss Date	Open Date	Closed Date	Loss/Exps Paid	Subro/Salvage Recovered	Rep
00.	BOYD, EDWARD								
	COMBINED PROP	ERTY DAMAGE	CL	10/07/2005	10/10/2005	10/19/2005	1,473.64	0.00	Schram
PHNP06	010204941								
00	1 HOLMES, LAKESHIA								
	COMBINED PROP	ERTY DAMAGE	CL	01/09/2006	01/09/2006	01/18/2006	2,931.76	0.00	Schram
PHNP06	030213705								
00	1 EXPRESS CAR RENT	ΓAL							
	COMBINED PROP	ERTY DAMAGE	CL	03/21/2006	03/23/2006	04/24/2006	406.76	0.00	Schram
PHNP06	040214839								
00	1 PHELPS, CHARISE								
	COMBINED PROP	ERTY DAMAGE	CL	03/30/2006	04/03/2006	04/20/2006	974.69	0.00	Schram
PHNP06	6040215417								
00	1 Shelby County Head S	Start, Inc.							
	COMP - Theft		CL	03/27/2006	04/06/2006	04/27/2006	536.87	0.00	Falcone
	Total for Policy:	5 Claims			Total Reserves	0.00	6,323.72	0.00	

Date: April 19, 2010 Page: 2 of 2

Customer Loss Detail Report (By Account/Policy Number/Claim Number)



Account:

75181

Grand Total:

Shelby Co. Govt., Div. of Comm. Services

Policy:

PHPK177932

07/01/2006 - 07/01/2007

6 Claims

Subro/Salvage Recovered Rep Loss/Exps Claim Number Status Loss Date Open Date **Closed Date** Paid PHNP06100236298 001 Shelby County Government, Division of CL 08/15/2006 10/02/2006 12/19/2007 59,814.25 1,675.00 Schram Comp Fire Total Loss 08/15/2006 1,675.00 Schram CL 10/02/2006 12/19/2007 1,943.00 Collision Total for Policy: Total Reserves: 0.00 61,757.25 3,350.00 1 Claims Total Reserves: 0.00 68,080.97 3,350.00 Total for Account: 6 Claims Total Reserves: 3,350.00

0.00

68,080.97

Date: April 19, 2010 1 of 3

Customer Loss Detail Report (By Account/Policy Number/Claim Number)



Account:

Page:

75181

Shelby Co. Govt., Div. of Comm. Services

Policy:

Claim Number

PHPK244515

07/01/2007 - 07/01/2008

There are no claims available for this policy post 01/01/1996.

Status

Loss Date

Open Date

Closed Date

Loss/Exps Paid

Subro/Salvage Recovered Rep

No Claimants

No Loss Types

Total for Policy:

0 Claims

Total Reserves:

0.00

0.00

0.00

Date: April 19, 2010 Page: 2 of 3 Customer Loss Detail Report
(By Account/Policy Number/Claim Number)



Account:

75181

Shelby Co. Govt., Div. of Comm. Services

Policy:

PHPK326529

07/01/2008 - 07/01/2009

There are no claims available for this policy post 01/01/1996.

Claim Number

Status

Loss Date

Open Date

Closed Date

Loss/Exps Paid Subro/Salvage

Recovered Rep

No Claimants

No Loss Types

Total for Policy:

0 Claims

Total Reserves:

0.00

0.00

0.00

Date:

April 19, 2010

Page: 3 of 3

Customer Loss Detail Report (By Account/Policy Number/Claim Number)



Account:

75181

Shelby Co. Govt., Div. of Comm. Services

Policy:

PHPK434814

07/01/2009 -

07/01/2010

Claim Number

Status

Open Date Loss Date

Closed Date

Loss/Exps Paid

Subro/Salvage Recovered Rep

PHNP10030459549

001 DANE, ABBEY

COMBINED PROPERTY DAMAGE

CL

03/26/2010

03/29/2010

03/31/2010

1,901.70

0.00 Campbell

Total for Policy:

1 Claims

Total Reserves:

0.00

1,901.70

Total for Account:

1 Claims

Total Reserves:

0.00

1,901.70

0.00

0.00

Grand Total:

1 Claims

Total Reserves:

0.00

1,901.70

0.00

ATTACHMENT 5 SHELBY COUNTY HEAD START BUSINESS AUTOMOBILE COVERAGE Form PI-CA-001

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY. BUSINESS AUTO COVERAGE EXTENSION FORM

Throughout this endorsement the words "you" and "your" refer to the Named Insured shown in the Declarations. The words "we," "us" and "our" refer to the Company providing this insurance.

This endorsement modifies insurance provided under the following:

BUSINESS AUTO COVERAGE FORM

The following is a summary of the Limits of Insurance and additional coverage provided by this endorsement. For complete details on specific coverages, consult the policy contract wording.

Broadening of Coverages applicable

No additional limits

Broad Form Named Insured

One Comprehensive deductible per "occurrence"

Notice of and Knowledge of Occurrence

Unintentional Errors or Omissions

Mental Anguish Redefined

Blanket Waiver of Subrogation

Accidental Discharge Air Bag

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Auto Loan/Lease Total Loss Protection

Additional Coverages	Limits applicable
Cost of Bail Bonds	\$3,000
Hired Car Physical damage	\$35,000
Hired Car Physical Damage – Loss of Use	\$75/\$750 maximum
Personal Effects Coverage	\$400
Physical Damage – Transportation Expense	\$50 day/\$1,500 maximum
Rental Reimbursement	\$30 per day/30 days
Electronic Equipment Coverage	\$300
Towing	\$50
Glass	Full/No Deductible

COMMERCIAL AUTO

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

BUSINESS AUTO COVERAGE EXTENSION FORM

This endorsement modifies insurance provided under the following:

BUSINESS AUTO COVERAGE FORM

With respect to coverage provided by this endorsement, the provisions of the Coverage Form apply unless modified by the endorsement. The deductibles indicated in the auto declarations are applicable to this form unless a contrary deductible is indicated.

BROAD FORM NAMED INSURED

Section II – LIABILITY COVERAGE A. 1, WHO IS AN INSURED provision is amended by adding the following:

- d. Any business entity newly acquired or formed by you during the policy period provided you own 50% or more of the business entity and the business entity is not separately insured for Business Auto Coverage. Coverage is extended up to a maximum of 180 days following acquisition or formation of the business entity.
- e. Board members (or their spouse) while renting a vehicle while on business for the named insured.

COVERAGE EXTENSIONS -SUPPLEMENTARY PAYMENTS

Section II – LIABILITY COVERAGE A. 2. a. COVERAGE EXTENSIONS, Supplementary Payments 2 and 4 is replaced by the following:

- Up to \$3,000 for cost of bail bonds (including bonds for related traffic law violations) required because of an "accident" we cover. We do not have to furnish these bonds.
- All reasonable expenses incurred by the "insured" at our request, including actual loss of earning up to \$300 a day because of time off from work.

HIRED CAR PHYSICAL DAMAGE

Any "auto" you lease, hire, rent or borrow from someone other than your employees or partners or members of their household is a covered "auto" for each of your physical damage coverages.

The most we will pay for "loss" in any one "accident" is \$35,000.

HIRED CAR PHYSICAL DAMAGE - LOSS OF USE

Section II – LIABILITY COVERAGE, B. Exclusions 2 and 6 are changed as follows:

Notwithstanding Section II, LIABILITY COVERAGES, B. Exclusions 2 and 6, we will pay sums which you legally must pay to the lessor of a covered "auto" which you have leased without a driver for 30 days or less for the lessor's loss of use of the covered "auto", provided:

- This insurance provides comprehensive, specified causes of loss or collision coverage on the covered "auto";
- The loss of use results from the covered "auto" being damaged in an accident while you are leasing it.

We will pay up to \$75 per day subject to a maximum limit of \$750.

PERSONAL EFFECTS COVERAGE

Section III – PHYSICAL DAMAGE COVERAGE A. is amended by adding the following:

We will pay up to \$400 for "loss" to wearing apparel and other personal effects which are:

- a. owned by an "insured"; and
- b. in or on your covered "auto".

This coverage applies only in the event of a total theft of your covered "auto".

No deductibles apply to this coverage.

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PHYSICAL DAMAGE - TRANSPORTATION EXPENSES

Section III – PHYSICAL DAMAGE COVERAGE A. 4 Coverage Extension is replaced by the following:

We will pay up to \$50 per day to a maximum of \$1,500 for temporary transportation expenses incurred by you because of the total theft of a covered "auto" of the private passenger type. We will pay only for those covered "autos" for which you carry either Comprehensive or Specified Causes of Loss coverage. We will pay for temporary transportation expenses incurred during the period beginning 24 hours after the theft and ending, regardless of the policy's expiration, when the covered "auto" is returned to use or we pay for its "loss".

If the temporary transportation expenses incurred arise from your rental of an "auto" of the private passenger type, the most we will pay is the amount it costs to rent an "auto" of the private passenger type which is of the same like kind and quality as the stolen covered "auto".

DEDUCTIBLE

Section III – PHYSICAL DAMAGE COVERAGE D. Deductible is amended by adding the following:

Only One Comprehensive Deductible per "occurrence" will apply to any "loss" resulting from a covered peril.

"Occurrence" means a single incident, including continuous or repeated exposure to substantially the same general harmful conditions within a 24-hour period.

NOTICE OF AND KNOWLEDGE OF OCCURRENCE

Section IV – BUSINESS AUTO CONDITIONS, A. 2 Duties in the Event of Accident, Claim, Suit or Loss, is amended by adding the following:

- In the event of "accident", claim, "suit" or "loss", you must give us or our authorized representative prompt notice of the "accident" or "loss". Include:
 - (1) How, when and where the "accident" or "loss" occurred:
 - (2) The "insured's" name and address; and
 - (3) to the extent possible, the names and addresses of any injured persons and witnesses.

Your duty to give us or our authorized representative prompt notice of the "accident" or "loss" applies only when the "accident" or "loss" is known to:

- 1. you, if you are an individual;
- 2. a partner, if you are a partnership; or
- an executive officer or insurance manager, if you are a corporation.

UNINTENTIONAL ERRORS OR OMISSIONS

Section IV – BUSINESS AUTO CONDITIONS, B. 2 Concealment, Misrepresentation, or Fraud, is amended by adding the following:

The unintentional omission of, or unintentional error in, any information given by you shall not prejudice your rights under this insurance. However, this provision does not affect our right to collect additional premium or exercise our right of cancellation or non-renewal.

MENTAL ANGUISH

Section V – Definitions C. is amended by adding the following:

"Bodily Injury" also includes mental anguish but only when the mental anguish arises from other bodily injury, sickness, or disease.

BLANKET WAIVER OF SUBROGATION

Section IV – BUSINESS AUTO CONDITIONS, 5. Is replaced by the following:

5. Transfer of rights of recovery against others to us

We waive any right of recovery we may have against any person or organization because of payments we make for "bodily injury" or "property damage" arising out of the operation of a covered "auto" when you have assumed liability for such "bodily injury" or "property damage" under an insured contract.

RENTAL REIMBURSEMENT COVERAGE

We will pay up to \$30 per day, for up to 30 days, for rental reimbursement expenses incurred by you for the rental of an "auto" because of "loss" to a covered "auto". We will also pay up to \$300 for reasonable and necessary expenses incurred by you to remove and replace your materials and equipment from the covered "auto".

If "loss" results from the total theft of a covered "auto" of the private passenger type, we will pay under this coverage only that amount of your rental reimbursement expenses which is not already provided under PHYSICAL DAMAGE – TRANSPORTATION EXPENSE of this endorsement.

ELECTRONIC EQUIPMENT COVERAGE

We will pay with respect to a covered "auto" for "loss" to any electronic equipment that receives or transmits audio, visual or data signals and that is not designed solely for the reproduction of sound. This coverage applies only if the equipment is permanently installed in the covered "auto" at the time of the "loss", and such equipment is designed to be solely operated by use of the power from the "auto's" electrical system, in or upon the covered "auto".

The most we will pay for all "loss" to audio, visual or data electronic equipment and any accessories used with this equipment as a result of any one "accident" is the least of:

- The actual cash value of the damaged or stolen property at the time of the "loss"; or
- The cost of repairing or replacing the damaged or stolen property with other property of like kind and quality; or

3. \$300.

This coverage will not apply if there is other insurance provided by this policy for the above described electronic equipment. We will, however, pay any deductible, up to \$300, that is applicable under the provisions of the other insurance.

TOWING

We will pay up to \$50 for towing and labor costs incurred each time a covered "auto" is disabled. However, the labor must be performed at the place of disablement.

No deductible applies to this section.

GLASS

Physical Damage for a covered "auto" described or designated in the schedule is amended as follows:

- A. No deductible applies to "loss" to glass used in the windshield or windows.
- B. All other physical damage coverage provisions apply.

ACCIDENTAL DISCHARGE -- AIRBAG COVERAGE

Under SECTION III - PHYSICAL DAMAGE COVERAGE, B. Exclusions, the following is added to Exclusion 3.:

 This exclusion does not apply to the accidental discharge of an airbag. This coverage is excess of any other collectible insurance or warranty. No deductible applies to this coverage.

AUTO LOAN/LEASE TOTAL LOSS PROTECTION ENDORSEMENT

Under SECTION III – PHYSICAL DAMAGE COVERAGE C. Limit of Insurance is replaced with the following:

 The most we will pay for "loss" in any one "accident" is the lesser of:

- a. The actual cash value of the damaged or stolen property as of the time of the "loss"; or
- b. The cost of repairing or replacing the damaged or stolen property with other property of like kind and quality.
- Our Limit of Insurance for "total loss" will be the greater of:
 - The balance due under the terms of the lease or loan, to which your auto is subject but not including:
 - past due payments:
 - (2) financial penalties imposed under the lease;
 - (3) security deposits not refunded;
 - (4) costs for extended warranties or insurance; or
 - (5) final payment due under a "Balloon Loan"; or
 - Actual cash value of the stolen or damaged property.
 An adjustment for depreciation and physical condition will be made in determining actual cash value at the time of loss.
- 3. Additional Definitions
 - a. "Total Loss", for the purpose of this coverage, means a loss in which the estimated cost of repairs, plus the salvage value, exceeds the actual cash value.
 - b. "Balloon Loan" is one with periodic payments that are insufficient to repay the balance over the term of the loan, thereby requiring a large final payment.
- 4. Additional Conditions

This coverage will apply only to the original lease or loan written on your

covered auto. In order for this coverage to apply, leased autos must be leased or rented to you under a leasing or rental agreement, for a period of not less than six months, that requires you to provide direct primary insurance for the benefit of the lessor.